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DIVISION 1

AGENCY PROCEDURAL RULES

331-001-0000

Notice of Proposed Rulemaking

(1) Prior to the adoption, amendment or repeal of any rule, the Oregon Health Licensing Agency shall give notice of its intended action;

(a) In the manner established by rule adopted by the agency under ORS 183.341(4), which provides a reasonable opportunity for interested persons to be notified of the agency's proposed action;

(b) In the Secretary of State's bulletin referred to in ORS 183.360 at least 21 days prior to the effective date;

(c) By delivery of notice to persons on the agency mailing list, at least 28 days before the effective date of the rule, pursuant to ORS 183.335;

(d) By delivery of notice to certain legislators, at least 49 days before the effective date of the rule, pursuant to ORS 183.335;

(2) To the Associated Press and Capitol Building Press Room, and other members of the media who have requested notification;

(3) To persons, organizations, or publications, where the agency determines that such persons, organizations, or publications, would have an interest in the subject matter of the proposal based on applicability to each agency program, board or council.

(4) Delivery of notice of an intended action under subsection (1)(a), (c) and (d) of this section shall be in accordance with ORS 183.335(2)(e). Delivery of notice of an intended action under subsection (1)(b), (2) and (3) of this section may be provided by regular U.S. Postal Service mail, electronic mail, facsimile transmission, or other delivery of printed copy.

(5) A copy of proposed rules and permanently filed rules shall be posted on the agency's Web site, and program mini-sites accessed at <http://www.oregon.gov/OHLA/index.shtml> and http://www.oregon.gov/OHLA/Laws_and_Rules.shtml.

(6) Persons may obtain a printed copy of rules or related documents upon written request and payment of appropriate fee for copies of agency documents as specified in OAR 331-010-0030.

(7) The agency may update the mailing list established pursuant to ORS 183.335(8) annually by requesting persons to confirm that they wish to remain on the mailing list. If a person does not respond to a request for confirmation within 28 days of the date the agency sends the request, the agency will remove the person from the mailing list. Any person removed from the mailing list will be immediately returned to the mailing list upon request, if the person provides a mailing address to which notice may be sent.

Stat. Auth.: ORS 183, 676.605, 676.615

Stats. Implemented: ORS 183, 676.605, 676.615

Hist.: HLO 1-2004, f. & cert. ef. 2-13-04; HLA 1-2009, f. & cert. ef. 6-1-09

331-001-0010

Model Rules of Procedure

Pursuant to ORS 183.341, the Oregon Health Licensing Agency adopts the Model Rules of Procedures as promulgated by the Attorney General of the State of Oregon under the Administrative Procedures Act as amended and effective January 1, 2008.

Stat. Auth.: ORS 183 & 676.605

Stats. Implemented: ORS 183 & 676.605

Hist.: HLO 1-2004, f. & cert. ef. 2-13-04; HLA 1-2009, f. & cert. ef. 6-1-09

331-001-0020

Applicability of Agency Rules

The provisions of OAR 331-001-0000 through 331-030-0030 shall apply in the administration and regulation of all programs administered by the agency except as otherwise specifically provided.

Stat. Auth.: ORS 676.615 & OL 2003, Ch. 547

Stats. Implemented: ORS 676.615 & OL 2003, Ch. 547

Hist.: HLO 1-2004, f. & cert. ef. 2-13-04

DIVISION 10

AGENCY GENERAL ADMINISTRATION RULES

331-010-0000

Definitions

Unless the context requires otherwise, the following definitions shall apply to OAR Chapter 331.

(1) "Agency" means the Oregon Health Licensing Agency.

(2) "Authorization" means the official document, i.e. certificate, license, permit or registration, issued by the agency, for any program administered under ORS 676.606, as prima facie evidence of the right to practice in accordance with the laws and rules of the regulatory programs administered by the agency.

(3) "Director" means, pursuant to ORS 676.610, the individual who has sole responsibility for the administrative, fiscal, human resource and regulatory functions of the agency.

(4) "Oregon Health Licensing Agency" means the agency assigned to carry out the administrative, programmatic and daily operations, and regulatory functions of the Boards, Councils and Programs listed in ORS 676.606.

(5) "Practitioner" means the individual issued a certificate, license, permit or registration by the agency who has received authorization within their defined field of practice.

(6) "Program" means the office and staff designated to carry out the daily functions of the Body Piercing Licensing Program as defined in ORS 690.500 to 690.570; or as the context requires, "program" may also be used to refer to the collective boards, councils and programs administered by the agency.

(7) "Regulatory authority" means a recognized governing body of a city, county, state or country that has been charged with the responsibility for overseeing the administration and regulation of an occupation or profession.

Stat. Auth.: ORS 676.615

Stats. Implemented: ORS 676.606, 676.615

Hist.: HLO 1-2004, f. & cert. ef. 2-13-04; HLA 1-2009, f. & cert. ef. 6-1-09

331-010-0010

Fees

(1) Payments made to the Health Licensing Office should be made for the exact amount of the transaction.

(2) Transactions conducted with the agency where either the payment or required documentation is incomplete or incorrect may be returned to the payer for correction before being processed by the agency.

(3) Fees will be applied as directed by the applicant, authorization holder or payer. Fees misapplied may be corrected by written request specifying the certificate, license, permit or registration number(s) affected and the action requested, subject to conditions in OAR 331-010-0020(2).

(4) Fees paid to the agency are not transferable between programs or from person-to-person where the applicant was eligible for service and service was rendered pursuant to application or transaction request submitted to the agency.

(5) Payments received by the agency without indication as to purpose or intent or as an amount of overpayment will first be applied

toward any outstanding civil penalty balance or administrative processing fee owed.

(6) Fee schedules are published in the administrative rules for each Board, Council or Program administered by the agency.

(7) Dishonored Check or Electronic Payment. Pursuant to ORS 30.701, whenever a bank check, credit or debit transaction in payment of an obligation due for fees, penalties, copies of records or materials, or other services to the agency, is dishonored by the bank upon which the check is drawn, the applicant or authorization holder will be assessed and must pay an administrative processing fee in the amount of \$25. The agency may take any other disciplinary action against an authorization holder or payer and may seek other legal remedies in pursuing to effect collection of the returned items. If a check is returned for NSF or uncollected funds the agency will attempt to collect payment electronically.

Stat. Auth.: ORS 30.701, 676.625 & OL 2003, Ch. 547 Sec.10, 14, 22, 30, 50, 61, 69, 86, 100

Stats. Implemented: ORS 30.701, 676.625 & OL 2003, Ch. 547 Sec.10, 14, 22, 30, 50, 61, 69, 86, 100

Hist.: HLO 1-2004, f. & cert. ef. 2-13-04

331-010-0020

Refund of Payments

(1) The Oregon Health Licensing Agency will not refund any payment, which includes fees, penalties or other charges, unless the agency is in error. Information not known by the agency because the authorization holder or payer supplied the incorrect information is not considered an error.

(2) The agency will comply with ORS 291 and 293 and the Oregon Accounting Manual regarding administration of public funds pertaining to assessment of fees, charges and refunding monies.

(3) Application fees will not be refunded. The agency will retain the application fee if an applicant withdraws the application for a certificate, license, permit, or registration before the issuance of the authorization, or fails to complete the application process.

(4) The agency may refund fees paid for a scheduled examination on a case-by-case basis. In making its determination, the agency will consider an applicant's individual set of circumstances when the applicant fails to appear for a scheduled examination.

(5) The agency will not refund fees paid for agency scheduled diversion or infection control standards training if the applicant fails to appear and complete the prescribed training; however, the fees may be applied toward any civil fine imposed for violations of laws or rules.

(6) The agency shall determine, on a case-by-case basis, the individual set of circumstances noted in subsections (4) and (5) of this rule, such as a medical emergency, personal hardship or unforeseen event that impedes the individual from appearing for an agency-scheduled examination or training. The agency may request documentation from the individual to validate the circumstance cited and may refund the fees or reschedule an examination or training as appropriate.

Stat. Auth.: ORS 30.701, 293.445, 676.625

Stats. Implemented: ORS 30.701, 293.445, 676.625

Hist.: HLO 1-2004, f. & cert. ef. 2-13-04; HLA 1-2009, f. & cert. ef. 6-1-09

331-010-0030

Fees for Public Records and Publications

(1) All requests for copies of public records pertaining to the Oregon Health Licensing Agency, or any program it administers, shall be submitted in writing, electronic mail, or by completion of an electronic form provided by the agency. Requests are subject to disclosure according to the Public Records Law, ORS 192.410 to 192.505, and rules adopted thereunder.

(2) The agency may charge a fee reasonably calculated to reimburse the agency for costs of providing and conveying copies of public records. Fees shall not exceed the cost of locating, compiling, making available for inspection, preparing copy in paper, audio, computer disk, and delivering public records. All estimated fees and charges must be paid before public records will be made available for inspection or copies provided.

(3) The agency shall notify a requestor of the estimated costs of making records available for inspection or providing copies of records to the requestor. If the estimated costs exceed \$25, the agency shall provide written notice and shall not act further to respond to the request unless and until the requestor confirms that the requestor wants the agency to proceed with making the public records available.

(4) Charges to the general public shall be payable in cash, cashier's check, money order, or credit card. Payment by personal check for copies of official documents is not accepted.

(5) The agency shall charge 25¢ per page for the first 20 pages and 15¢ per page thereafter to recover the costs of photocopying and normal and reasonable staff time to locate, separate, photocopy and return document(s) to file and to prepare/mail public record(s) to requestors. If, for operational or other reasons, the agency uses the services of an outside facility or contractor to photocopy requested records, the agency shall charge the actual costs incurred.

(a) "Page" refers to the number of copies produced. Staff will not reduce the copy size or otherwise manipulate records in order to fit additional records on a page, unless staff concludes that it would be the most effective use of their time. Consistent with ORS 192.240, all copies will be double-sided. A double-sided copy will be charged as two single pages.

(6) "Normal and reasonable" staff time is 20 minutes or less per request:

(a) Additional charges for staff time may be made when responding to record requests that require more than the "normal and reasonable" time for responding to routine record requests. Staff time shall be charged at the agency's staff hourly rate.

(b) These charges are for staff time in excess of 10 minutes spent locating, compiling, sorting and reviewing records to prepare them for inspection, as well as all time required to separate or remove exempt information or to supervise inspection of documents. The agency shall not charge for time spent in determining the application of the provisions of ORS 192.410 to 192.505.

(7) Charges for regular agency publications and media requests, such as computer disks, video cassettes, audio tapes or other types of public record formats, shall be available upon request and a price list shall be published on the agency Web site annually.

(8) The agency may charge individuals actual postage costs for mailing of records. When mailing voluminous records or responding to special requests, the agency shall charge for staff time required to prepare the records for mailing, in addition to actual postage.

(9) The agency shall charge \$27 per hour, with a \$7.50 minimum, for staff time required to fill public record requests that require electronic reproduction. Charges include time spent locating, downloading, formatting, copying and transferring records to media. Charges for reproduction media are available upon request.

(10) Due to the threat of computer viruses, the agency will not permit individuals to provide diskettes for electronic reproduction of computer records.

Stat. Auth.: ORS 197.410 - 192.505, 676.625

Stats. Implemented: ORS 197.410 - 192.505, 676.625

Hist.: HLO 1-2004, f. & cert. ef. 2-13-04; HLA 1-2009, f. & cert. ef. 6-1-09

331-010-0040

Notification Requirements

Notification of a change in any authorization holder's licensing information must be submitted within 30 calendar days of the change to the agency by written notice given in person at the agency office, by regular U.S. Postal Service, facsimile transmission, Web-based interactive data collection or electronic mail. A change in information includes, but is not limited to the following:

(1) Authorization holders:

(a) Name — first or last. Approved documentation is required, such as marriage certificate, divorce decree, court judgment documents, or other agency approved documentation;

(b) Residential or mailing address;

(c) Area code and telephone number;

(d) Employment status; or

(e) Work location.

(2) Facility license holders:

(a) Facility name or Assumed Business Name as filed with Secretary of State, Corporations Division under 648.007;

(b) Business telephone number, including area code;

(c) General hours of operation;

(d) Address change resulting from city or U.S. Postal Service action; or

(e) Closure or sale of business facility or practice.

(3) Independent contract registration holders:

(a) Facility name, physical address, telephone number and license number;

(b) General hours of operation;

(c) Changing permanent work location;

(d) Performing services at multiple licensed facilities on a permanent or temporary basis;

(e) Ceasing to operate as an independent contractor before expiration of the registration to avoid late renewal payment if reactivation may occur within one year of the expiration date.

Stat. Auth.: ORS 676.615

Stats. Implemented: ORS 676.615

Hist.: HLO 1-2004, f. & cert. ef. 2-13-04; HLA 1-2009, f. & cert. ef. 6-1-09

331-010-0050

Authorization Holders; Military Leave

(1) A practitioner authorized to practice under a program listed in ORS 676.606 is not required to renew the authorization or pay renewal fees while in active military service unless required by the authorization holders branch of the military.

(2) To be restored to former authorization status the authorization holder must notify the agency in writing within 60 days of being honorably discharged.

(3) No fees will be due until the following renewal period.

(4) Requirements for completing continuing education hours during an authorization holder's active duty period shall be evaluated on a case by case basis.

Stat. Auth.: ORS 676.615

Stats. Implemented: ORS 676.607 & 676.608

Hist.: HLA 1-2011(Temp), f. & cert. ef. 3-1-11 thru 8-28-11; HLA 2-2011(Temp), f. & cert. ef. 3-17-11 thru 8-28-11; HLA 8-2011, f. 8-9-11, cert. ef. 8-15-11

DIVISION 20

AGENCY REGULATORY OPERATIONS RULES

331-020-0000

Contested Case Procedure

(1) Subject to the approval of the Attorney General, an officer or employee of the agency is authorized to appear on behalf of any Board, Council, or Program administered by the agency when the agency proposes to refuse to issue, renew, suspend, revoke, place on probation or impose a civil penalty on any applicant, licensee, registrant or other individual.

(2) The agency representative may not make legal argument on behalf of the agency:

(a) "Legal argument" includes arguments on:

(A) The jurisdiction of the agency to hear the contested case;

(B) The constitutionality of a statute, rule, and/or the application of a constitutional requirement to an agency; and

(C) The application of court precedent to the facts of the particular contested case proceeding.

(b) "Legal argument" does not include presentation of evidence, examination and cross-examination of witnesses or presentation of factual arguments or arguments on:

(A) The application of the facts to the statutes or rules directly applicable to the issues in the contested case;

(B) Comparison of prior actions of the agency in handling similar situations;

(C) The literal meaning of the statutes or rules directly applicable to the issues in the contested case; and

(D) The admissibility of evidence or the correctness of procedures being followed.

Stat. Auth.: ORS 183 & OL 2003, m Ch. 547, Sec. 4

Stats. Implemented: ORS 183 & OL 2003, m Ch. 547, Sec. 4

Hist.: HLO 1-2004, f. & cert. ef. 2-13-04

331-020-0010

Requiring an Answer to Charges as Part of Notices to Parties in Contested Cases

In addition to the requirements stated in OAR 137-003-0000 of the Attorney General's Model Rules of Procedure adopted under 331-001-0010, the notice to parties in contested cases may include a statement that an answer to the assertions or charges will be required and, if so, the consequence of failure to answer. A statement of the consequences of failure to answer may be satisfied by enclosing a copy of 331-020-0020 with the notice.

Stat. Auth.: ORS 183
Stats. Implemented: ORS 183
Hist.: HLO 1-2004, f. & cert. ef. 2-13-04

331-020-0020

Hearing Requests and Answers; Consequences of Failure to Answer

(1) A hearing request, and answer when required, shall be made in writing to the Agency by the party or the party's attorney.

(2) An answer shall be made in writing to the Agency with any request for a hearing on a matter related to violations alleged under ORS 675.360 to 675.410, 687.405 to 687.495, 688.808 to 688.840, the rules adopted thereunder, or violations alleged under 676.612 when related to the practice of direct entry midwifery, sex offender treatment, respiratory care or polysomnography. The answer shall include the following:

(a) An admission or denial of each factual matter alleged in the notice; and

(b) A short, concise statement of each relevant affirmative defense the party may have.

(3) When an answer is required:

(a) Factual matters alleged in the notice and not denied in the answer shall be presumed admitted;

(b) Failure to raise a particular defense in the answer will be considered a waiver of such defense;

(c) New matters alleged in the answer (affirmative defenses) shall be presumed to be denied by the agency; and

(d) Evidence shall not be taken on any issue not raised in the notice and the answer.

(4) When an answer is required, the party or party's attorney may amend the response and answer, but no later than 10 days before the scheduled contested case hearing.

Stat. Auth.: ORS 183
Stats. Implemented: ORS 183
Hist.: HLO 1-2004, f. & cert. ef. 2-13-04; HLA 1-2012(Temp), f. & cert. ef. 3-1-12 thru 8-27-12; HLA 9-2012, f. 5-10-12, cert. ef. 5-15-12

331-020-0030

Inquiries; Filing a Complaint

(1) An individual may contact the Oregon Health Licensing Agency to inquire on the licensing record, status or employment of a person issued an authorization by the agency, or to comment on any issue concerning an individual regulated by the agency.

(2) Complaints against individuals practicing in one of the professions listed in ORS 676.606, may be filed with the agency. The complaint may be made on forms provided by the agency, which includes the following information:

(a) The name, address and telephone number of the person making the complaint;

(b) The name of the person or facility against which the complaint is being made;

(c) A concise description of the charge against the person or facility listing the date, time and circumstances of the alleged violation; and

(d) The signature of the person making the complaint.

Stat. Auth.: ORS 183, 676.605, 676.606
Stats. Implemented: ORS 183, 676.605, 676.606
Hist.: HLO 1-2004, f. & cert. ef. 2-13-04; HLA 1-2009, f. & cert. ef. 6-1-09

331-020-0040

Complaint Processing and Investigation

Pursuant to ORS 676.608, complaints filed with the Oregon Health Licensing Agency will be handled as follows:

(1) The agency will determine if the complaint is related to a profession or occupation regulated and administered by the agency and the complaint falls within authority delegated to the agency by statute.

(2) The agency investigator(s):

(a) Will review the information and as applicable, interview parties and witnesses, and examine physical evidence relating to the complaint;

(b) Will advise on whether an authorization holder or other individual practiced within the acceptable standards of the particular program;

(c) Will make recommendations for agency action.

(3) After receiving advice from the investigator(s), the agency will determine what action will be taken in accordance with ORS 676.608.

(4) As used in ORS 676.608(8), to "appear before the agency" includes: an investigative interview conducted under oath, under subpoena or otherwise compelled; an interview or hearing before a board, council, or subcommittee of a board or council; any depositions authorized by the agency; pre-hearing conferences; and contested case hearings. It does not include interrogatories, written admissions, other written communications, or voluntary communications.

Stat. Auth.: ORS 183, 676.605, 676.608 & 676.615
Stats. Implemented: ORS 183, 676.605, 676.608 & 676.615
Hist.: HLO 1-2004, f. & cert. ef. 2-13-04; HLA 1-2009, f. & cert. ef. 6-1-09; HLA 1-2011(Temp), f. & cert. ef. 3-1-11 thru 8-28-11; HLA 2-2011(Temp), f. & cert. ef. 3-17-11 thru 8-28-11; HLA 8-2011, f. 8-9-11, cert. ef. 8-15-11

331-020-0050

Response to Inquiry

Any person subject to a complaint involving conduct or service performed or provided may be required by the agency to respond. The person must respond to the agency within 20 calendar days from the date of the request, in the form and manner requested by the agency.

Stat. Auth.: ORS 183
Stats. Implemented: ORS 183
Hist.: HLO 1-2004, f. & cert. ef. 2-13-04

331-020-0060

Civil Penalty Considerations

(1) Pursuant to ORS 676.992, any person who violates any provision of law or rules of a regulated profession administered by the Oregon Health Licensing Agency and listed in ORS 676.606, may incur, in addition to any other penalty provided by law, a civil penalty in an amount not to exceed \$5,000 for each violation.

(2) In establishing the amount of the penalty for each violation, the agency will consider and evaluate each case on an individual basis. The agency will consider, but not be limited to factors listed in ORS 676.992, in determining the amount of the penalty.

Stat. Auth.: ORS 676.615, 676.992
Stats. Implemented: ORS 676.615, 676.992
Hist.: HLO 1-2004, f. & cert. ef. 2-13-04; HLA 1-2009, f. & cert. ef. 6-1-09

331-020-0070

Discipline

(1) The Oregon Health Licensing Agency may discipline authorization holders for violations of laws and rules, in accordance with ORS 676.612 and 676.992.

(2) Failure to cooperate with the agency or its agent is unprofessional conduct and is subject to disciplinary sanctions, which may include suspension or revocation and refuse to issue or renew or place on probation and assessment of civil penalties. Failure to cooperate with the agency or its agent includes, but is not limited to, the following:

(a) Failing to provide information within the specified time allotted and as requested by the agency;

(b) Failing to temporarily surrender custody of original client records to the agency upon request, which includes treatment charts, models, health histories, billing documents, correspondence and memoranda;

(c) Interference, use of threats or harassment which delays or obstructs any person in providing evidence in any investigation, contested case, or other legal action instituted by the agency;

(d) Interference, use of threats or harassment which delays or obstructs the agency in carrying out its functions under individual programs administered and regulated by the agency as listed in ORS 676.606 and rules adopted thereunder; or

(e) Deceiving or attempting to deceive the agency regarding any matter under investigation including altering or destroying any records.

(3) The agency, at its discretion, may require supplemental training in an appropriate area of study as determined by the agency, board or council, as a disciplinary sanction. Supplemental training may be in addition to assessment of a monetary penalty or the agency, board or council may waive or reduce a penalty, in cases requiring supplemental training.

(4) As used in ORS 676.612(2)(j) incompetence means engaging in conduct which evidences a lack of ability or fitness to perform the holder's professional functions.

(5) As used in ORS 676.612(2)(j) negligence means engaging in conduct detrimental to the client.

Stat. Auth.: ORS 676.607, 676.612, 676.992
Stats. Implemented: ORS 676.607, 676.612, 676.992

Hist.: HLO 1-2004, f. & cert. ef. 2-13-04; HLA 1-2009, f. & cert. ef. 6-1-09; HLA 8-2011, f. 8-9-11, cert. ef. 8-15-11

331-020-0080

Sanctions

(1) **CHILD SUPPORT IN ARREARS:** In accordance with ORS 25.750 to 25.783, the Oregon Health Licensing Agency will provide the Support Enforcement Division of the Department of Justice with authorization information which may be electronically cross-matched with Support Enforcement Division's records for persons under order of judgment to pay monthly child support and who are in arrears according to ORS 25.750(a), (b), and/or (c).

(2) The agency will suspend the authorization, if the Support Enforcement Division or the district attorney identifies the authorization holder as being in arrears with respect to any judgment or order requiring the payment of child support and that the case is being enforced under the provisions of ORS 25.080.

(3) Pursuant to ORS 25.750 to 25.785, the agency will notify the authorization holder of the suspension status and refer the person to the Support Enforcement Division or the district attorney for resolution.

(4) Upon notification by the Support Enforcement Division or district attorney and receipt of a release notice that the conditions resulting in the suspension no longer exist, the agency will reinstate the authorization upon compliance with all qualifications for renewal or reactivation.

(5) **DEFAULT TAX FILING OR PAYMENT:** In accordance with ORS 305.385, upon request the agency will provide the Department of Revenue with authorization information to determine if the holder has neglected or refused to file any return or to pay any tax without filing a petition with the department as stated in ORS 305.385(4)(a).

(6) The agency will propose to take action against an authorization holder identified by the Department of Revenue. If the agency proposes to refuse to issue, renew or suspend an authorization, opportunity for hearing will be accorded as provided in ORS 183.413 to 183.470 for contested cases.

(7) Upon notification by the department and receipt of a notice of release issued by the department that the authorization holder is in good standing with respect to any returns due and taxes payable to the department as of the date of the notice of release, the agency will renew, reactivate or release from suspension the authorization upon compliance with any qualifications for renewal or reactivation.

Stat. Auth.: ORS 25.080, 25.750 - 25.785, 183.310 - 183.470, 305.385, 348.393 - 348.399, 676.606, 676.612, 676.615
Stats. Implemented: ORS 25.080, 25.750 - 25.783, 183.310 - 183.470, 305.385, 348.393 - 348.399, 676.612 Hist.: HLO 1-2004, f. & cert. ef. 2-13-04
Hist.: HLO 1-2004, f. & cert. ef. 2-13-04; Renumbered from 331-030-0030, HLA 1-2009, f. & cert. ef. 6-1-09

DIVISION 30

CERTIFICATION, LICENSURE AND REGISTRATION REQUIREMENTS

331-030-0000

Application Requirements

(1) An applicant who has been the subject of any disciplinary action, including the imposition of a civil or criminal penalty, is not considered qualified for an Oregon authorization to practice until the Oregon Health Licensing Agency determines the scope, applicability and finality of the disciplinary action as it relates to the applicant's fitness to be issued an authorization to practice or use a professional title under a program listed in ORS 676.606. The disciplinary record may include, but not be limited to, actions imposed from the following:

(a) An Oregon health professional regulatory board as defined in ORS 676.160;

(b) A regulatory authority in Oregon or another state;

(c) A regulatory authority in another country or territory.

(2) Pursuant to ORS 181.534, 676.612 and OAR 331-030-005, the agency may require an applicant to complete a fingerprint check through the Oregon Department of Oregon State Police. The agency may also conduct a criminal background check of convictions to determine whether the applicant has been convicted of a crime that may

affect the applicant's fitness to practice in accordance with ORS 670.280.

(3) Material misrepresentation or material errors of fact on an application for or renewal of an authorization are grounds for disqualification of examination, refusal to issue or revocation of the authorization. Refer to ORS 676.612.

(4) Application for an authorization issued for any program administered by the agency under ORS 676.606 shall be made on forms prescribed and furnished by the agency.

(5) To be accepted and processed, an application must contain:

(a) Applicant's current name, address and telephone number;

(b) Applicant's date of birth;

(c) Applicant's signature and date of application;

(d) Applicant's Social Security or Individual Taxpayer Identification number.

(e) Applicant's ethnicity (optional);

(f) Applicant's gender (optional);

(g) Disclosure of any active or inactive disciplinary action, voluntary resignation of a certificate, license, permit or registration or sanction related to authorization imposed upon the applicant by any state or country regulatory authority;

(h) Disclosure of any active or inactive certificate, license, permit or registration issued by Oregon or another state;

(i) Payment for the exact amount of required fees; and

(j) All additional information required by the particular Board, Council or Program for which application is made.

(6) Applicants must list their Social Security or Individual Taxpayer Identification number on a form prescribed by the agency at the time of initial application and renewal for certification, licensure, permit or registration. The authority for this requirement is ORS 25.785, 305.385, 42 USC § 405(c)(2)(C)(i), and 42 USC § 666(a)(13).

(7) Failure to provide the Social Security or Individual Taxpayer Identification number will be a basis to refuse to accept the application or to issue an authorization. This information will be used for child support enforcement and tax administration purposes, unless the applicant authorizes other uses of the number. The authority for this requirement is ORS 25.785, 305.385, 42 USC § 405(c)(2)(C)(i), and 42 USC § 666(a)(13).

(8) Upon request by the agency an applicant must provide two forms of acceptable original identification issued by a federal, state or local government agency of the United States. The agency will consider other forms of identification if the procedures used in issuing the identification are sufficient to prove the applicant's identity and the identification contains security features that are sufficient to prevent alteration or counterfeiting. Acceptable identification includes, but is not limited to:

(a) An original or certified copy of birth certificate issued by a U.S. Territorial government or the government of a state or political subdivision of a state of the United States. OHLA will not accept a hospital-issued birth certificate, hospital card or birth registration or baptismal certificate.

(b) United States passport, not expired more than five years.

(c) United States passport card, not expired more than five years.

(d) U.S. Territory passport not expired more than five years.

(e) Tribal ID card from a federally recognized tribe located in Oregon or a federally recognized tribe with an Oregon affiliation if OHLA determines:

(A) The procedures used in issuing the card are sufficient to prove the applicant's identity; and

(B) The card contains security features that are sufficient to prevent alteration or counterfeiting of the card.

(f) Certificate of Citizenship (N560 and N561).

(g) Certificate of Naturalization (N550, N570 and N578).

(h) U.S. Citizen Identification Card (I-197 and I-179).

(i) U.S. Military documents including:

(A) Military or Armed Forces ID card;

(B) Military Common Access Card; or

(C) U.S. Uniform Services ID and Privileges card (DD1173 and DD1173-1).

(j) Resident Alien card

(k) Permanent Resident card (I-551).

(l) Out-of-state, District of Columbia, U.S. Territorial government or, instruction permit or identification card, that contains the appli-

cant's photograph, not expired more than one year unless hole-punched or marked "Not Valid as ID."

(m) Valid Oregon driver license, temporary driver license, instruction permit, or identification card. For the purposes of this subsection, OHLA will not accept a driver license that was issued without a photograph.

(n) Oregon Concealed Weapon Permit/Concealed Handgun License, not expired more than one year.

(o) Social Security card or other documentation issued by the Social Security Administration.

(9) OHLA will not accept a document as proof of identity and date of birth if OHLA has reason to believe the document is not valid. The agency may request an applicant present additional documentary proof of identity if the document presented does not establish the applicant's identity to the satisfaction of OHLA.

(10) At least one form of identification provided from the approved list in subsection (8) of this rule must be photographic.

[Publications: Forms referenced are available from the agency.]

Stat. Auth.: ORS 25.785, 305.385, 42 USC § 405(C)(2)(C)(i), and 42 USC § 666(a)(13), 670.280, 676.605 & 676.615

Stats. Implemented: ORS 25.785, 305.385, 42 USC § 405(C)(2)(C)(i), 42 USC § 666(a)(13), 670.280, 676.605 & 676.615

Hist.: HLO 1-2004, f. & cert. ef. 2-13-04; HLA 12-2008(Temp), f. 11-28-08, cert. ef. 12-1-08 thru 4-30-09; Administrative correction 5-20-09; HLA 1-2009, f. & cert. ef. 6-1-09

331-030-0004

Fingerprinting, State and Nationwide Criminal Background Checks, Fitness Determinations

(1) The Oregon Health Licensing Agency may conduct and require completion of a fingerprint and criminal background check to determine fitness of individuals applying for an authorization issued or renewed by the agency. These will be provided on prescribed forms provided by the agency. At the discretion of the agency, background checks may be conducted for any of the programs administered by the agency pursuant to ORS 676.606.

(2) Fingerprints may be obtained at a law enforcement office or at a private service acceptable to the agency. The agency will forward fingerprints to the Department of Oregon State Police for checks against state and national data sources. Any original fingerprint cards will subsequently be destroyed by the department.

NOTE: An applicant must pay the department any fees assessed for conducting the fingerprint service. An applicant must arrange for the report of the fingerprint check to be mailed directly to the Oregon Health Licensing Agency, Regulatory Operations Division.

(3) These rules are to be applied when evaluating the criminal history of all licensees and applicants listed in paragraph (1) of this section, and conducting fitness determinations based upon such history. The fact that the applicant has cleared the criminal history check does not guarantee the granting of an authorization.

(4) Except as otherwise provided in section (1), in making the fitness determination the agency shall consider:

- (a) The nature of the crime;
- (b) The facts that support the conviction or pending indictment or that indicate the making of the false statement;

(c) The relevancy, if any, of the crime or the false statement to the specific requirements of the subject individual's right to practice in any present or proposed position, services, and employment, that is authorized upon the issuance or renewal of the certificate, license, permit or registration; and

(d) Intervening circumstances relevant to the responsibilities and circumstances of the position, services, employment, certificate, license, permit or registration. Intervening circumstances include but are not limited to:

- (A) The passage of time since the commission of the crime;
- (B) The age of the subject individual at the time of the crime;
- (C) The likelihood of a repetition of offenses or of the commission of another crime;
- (D) The subsequent commission of another relevant crime;
- (E) Whether the conviction was set aside and the legal effect of setting aside the conviction; and

- (F) A recommendation of an employer.

(5) The agency may require fingerprints of any authorization holders or applicant listed in paragraph (1) of this section, who is the subject of a complaint or investigation, under authority of ORS

676.612(3)(c), for the purpose of requesting a state or nationwide criminal records background check.

(6) All background checks shall be requested to include available state and national data, unless obtaining one or the other is an acceptable alternative.

(7) Additional information required. In order to conduct the Oregon and national criminal history check and fitness determination, the agency may require additional information from the authorization holder or applicant as necessary. Information requested may include but is not limited to, proof of identity; residential history; names used while living at each residence; or additional criminal, judicial or other background information.

(8) All Oregon and national criminal history checks, confidentiality, and dissemination of information received, shall be in accordance to and as applicable with ORS 181.534 through 181.560 and OAR 257, division 10.

(9) The agency will permit the individual for whom a fingerprint-based criminal records check was conducted, to inspect the individual's own state and national criminal offender records and, if requested by the subject individual, provide the individual with a copy of the individual's own state and national criminal offender records.

(10) The agency shall determine whether an individual is fit to be granted, hold or renew an authorization, listed in paragraph (1) of this section, based on the criminal records background check, or any false statements made by the individual regarding criminal history of the individual, or any refusal to submit or consent to a criminal records check including fingerprint identification, and any other pertinent information obtained as a part of an investigation. If an individual is determined to be unfit, then the individual may not be granted an authorization. The agency may make fitness determinations conditional upon applicant's acceptance of probation, conditions, or limitations, or other restrictions placed upon the authorization.

(11) The agency may also consider any arrests and court records that may be indicative of a person's inability to perform as an authorization holder with care and safety to the public.

(12) If the agency determines an applicant or authorization holder is unfit, the individual is entitled to a contested case process pursuant to ORS 183. Challenges to the accuracy or completeness of information provided by the Oregon State Police, Federal Bureau of Investigation and agencies reporting information must be made through the Oregon State Police, Federal Bureau of Investigation, or reporting agency and not through the contested case process pursuant to ORS 183.

(13) If the applicant discontinues the application process or fails to cooperate with the criminal history background check the agency considers the application incomplete.

Stat. Auth.: ORS 25.785, 305.385, 42 USC § 405(C)(2)(C)(i), 42 USC § 666(a)(13), 670.280, 676.605, 676.615

Stats. Implemented: ORS 25.785, 305.385, 42 USC § 405(C)(2)(C)(i), 42 USC § 666(a)(13), 670.280, 676.605, 676.615

Hist.: HLA 1-2009, f. & cert. ef. 6-1-09

331-030-0010

Procedure for Issuing and Renewing Certificates, Licenses and Registrations

(1) Subject to ORS 676.612, authorizations issued by the Oregon Health Licensing Agency will be issued to qualified applicants after conducting fitness determinations and upon compliance with all requirements established by rules adopted by the agency.

(2) With the exception of temporary or demonstration permits, all authorizations will expire on the last day of the month, two years from the date the authorization was issued.

(3) The authorization will state the holder's name, address, authorization number, expiration date and bear the signature of the holder. The authorization will be mailed to the place of residence or mailing address recorded on the application and may substantiated through acceptable identification listed in OAR 331-030-0000.

(4) The agency may mail notice of expiration to the authorization holder, sending the notice to the last known address on file. The authorization holder is responsible for submitting a timely application for renewal whether or not a renewal form was mailed by the agency.

(5) Application for renewal shall be made in advance of the expiration date, and shall be submitted together with the required fee(s) and documentation, as the individual program stipulates for renewal. Pay-

ment must be postmarked or received by the agency during regular business hours on or before the expiration date. An authorization may be renewed using the agency's online renewal system accessed at <http://www.oregon.gov/OHLA/online renewals.shtml>.

(6) An application for renewal and payment received by the agency or postmarked after the expiration date may be assessed delinquent renewal fee(s) according to requirements stipulated in each individual program's rules for certificate, license or registration renewal.

(7) Notwithstanding subsection (1) of this rule, the agency may vary the renewal date of an authorization by giving the applicant written notice of the renewal date being assigned and by making prorated adjustments to the renewal fee.

Stat. Auth.: ORS 676.605 & 676.615

Stats. Implemented: ORS 676.605 & 676.615

Hist.: HLO 1-2004, f. & cert. ef. 2-13-04; HLA 12-2008(Temp), f. 11-28-08, cert. ef. 12-1-08 thru 4-30-09; Administrative correction 5-20-09; HLA 1-2009, f. & cert. ef. 6-1-09

331-030-0020

Authorization; Replacements

(1) An individual shall not display a sign or in any way advertise or purport to be an authorization holder or to be engaged in practice, or use a professional title, without first obtaining an authorization in the manner required according to statute and rules of a program administered by the Oregon Health Licensing Agency under ORS 676.606.

(2) The agency shall issue only one original authorization.

(3) The possession or posting of more than one of the same current authorization (original or replacement) is prohibited.

(4) All authorization holders must have immediate access to photographic identification as listed in OAR 331-030-0000 whenever performing services or open for business. Authorization holders must provide agency representatives with the appropriate identification immediately upon request.

(5) If for any reason a person is mistakenly issued a document that contains a material error and superseded by a corrected document, the agency has the authority to demand surrender of the incorrect authorization document issued by the agency. The individual must surrender the document requested within the time determined by the agency.

(6) The agency may issue a replacement authorization document, if:

(a) A written request for a replacement is submitted to the agency which contains the authorization holder's name, authorization number, address, telephone number, employment information, and a statement attesting that the original authorization has been lost, stolen or destroyed;

(b) The authorization is valid, current and not expired, suspended or revoked;

(c) Payment of the replacement fee accompanies the request;

(d) The authorization holder is not subject to any outstanding civil penalties or other disciplinary action.

Stat. Auth.: ORS 675.410, 676.605, 676.615, 690.015, 680.505,

687.415, 690.355, 694.025, 688.805, 700.020

Stats. Implemented: ORS 675.410, 676.605, 676.615, 690.015, 680.505, 687.415, 690.355, 694.025, 688.805, 700.020

Hist.: HLO 1-2004, f. & cert. ef. 2-13-04; HLA 1-2009, f. & cert. ef. 6-1-09

331-030-0025

Emergency Response

Practice in Oregon by out-of-state authorization holders in the event of an emergency:

(1) In the event of a disaster or emergency declared by the Governor of Oregon, the Oregon Health Licensing Agency shall allow authorization holders who are licensed in another state, performing services in a field of professional practice regulated by the agency under ORS 676.606, to practice in Oregon under special provisions during the period of the declared disaster or emergency, subject to such limitations and conditions as the Governor may prescribe.

(2) The out-of-state authorization holder must submit the following information to the agency:

(a) Verification of a permanent, current, and unrestricted authorization to practice in another state which is not the subject of a pending investigation or disciplinary action by a state board, or another state or federal agency; and

(b) Current federal or state photo identification, i.e., driver license or passport.

(3) The authorization holder shall provide the agency documentation demonstrating a request to provide services by an agency recognized public health organization, Emergency Medical Service (EMS) agency, county, state or federal entity, or has otherwise made arrangements to provide services within the practitioner's scope of professional practice in Oregon as the result of the declaration of a disaster or emergency.

(4) The authorization holder may not practice in Oregon under the special disaster or emergency provisions beyond the termination date of the declared disaster or emergency as prescribed by the Governor. Practice in Oregon beyond the termination date of the declared disaster or emergency requires licensure through the Oregon Health Licensing Agency.

Stat. Auth.: ORS 676.606, 676.612, 676.615

Stats. Implemented: ORS 676.606, 676.612, 676.615

Hist.: HLA 1-2009, f. & cert. ef. 6-1-09

331-030-0040

Affidavit of Licensure

(1) "Affidavit of Licensure" means an original document or other approved means of verifying an authorization to practice (certification, licensure or registration) status and history, including information disclosing all unresolved or outstanding penalties and/or disciplinary actions. Affidavit of Licensure may be requested from other regulatory authorities or from the Oregon Health Licensing Agency:

(2) For the purpose of this rule regulatory authority means:

(a) An Oregon health professional regulatory board as defined in ORS 676.160

(b) A regulatory authority in Oregon or another state;

(c) A regulatory authority in another country or territory.

Outgoing Affidavit of Licensure

(3) An applicant may request an affidavit of licensure be sent from the Oregon Health Licensing Agency for programs listed under ORS 676.606 to another regulatory authority or individual designated on the application. The following must be submitted to the agency:

(a) An application on a form prescribed by the agency;

(b) Two forms of identification listed in OAR 331-030-0000 (8); at least one must be photographic;

(c) Photocopies of identification listed in subsection (b) of this section must be submitted with the application if request is made through the mail; the photocopy must be legible; and

(d) The agency may require that an applicant present additional proof of identity pursuant to OAR 331-030-0000 (9).

Incoming Affidavit of Licensure

(4) An applicant applying for an authorization from a program listed under ORS 676.606 must arrange for the originating regulatory authority to forward directly to the agency a current and original "Affidavit of Licensure" signed by an authorized representative of the regulatory authority and affixed with an official seal or stamp to the affidavit of licensure. The applicant is responsible for payment of any fee the originating regulatory authority may assess for producing the affidavit of licensure.

(5) The agency may verify an applicant's authorization to practice and determine an applicant's qualifications and fitness to practice in a program administered under ORS 676.606 by the following:

(a) An affidavit of licensure may be obtained by accessing the regulatory authority's Web site by using an online verification system. The agency may assess a fee for obtaining affidavit of licensure.

(b) An affidavit of licensure may be electronically transmitted to the agency from the regulatory authority. The applicant is responsible for payment of any fee the originating regulatory authority may assess for producing the affidavit of licensure.

(c) An affidavit of licensure document hand delivered or mailed by the applicant and not mailed directly or transmitted through an approved means to the agency from the regulatory authority will invalidate qualification for authorization to practice, scheduling, and examination.

NOTE: The Affidavit of Licensure may be referred to as a "Verification of Licensure", "License Verification", "Certification of Licensure" or "License Certification" by other regulatory authorities. Both terms have the same purpose in disclosing an applicant's licensing status and history.

Stat. Auth.: ORS 676.606, 676.612 & 676.615

Stats. Implemented: ORS 676.606, 676.612 & 676.615

Chapter 331 Oregon Health Licensing Agency

Hist.: HLA 1-2009, f. & cert. ef. 6-1-09; HLA 5-2010(Temp), f. 7-23-10, cert. ef. 7-26-10 thru 1-15-11; HLA 6-2010, f. 10-14-10, cert. ef. 10-15-10

DIVISION 105

BOARD OF ATHLETIC TRAINERS: GENERAL ADMINISTRATION

331-105-0030

Fees

(1) Applicants and registrants are subject to the provisions of OAR 331-010-0010 and 331-010-0020 regarding the payment of fees, penalties and charges.

(2) Fees established by the Oregon Health Licensing Agency are as follows:

- (a) Application:
- (A) Registration: \$100.
- (B) Registration by reciprocity: \$150.
- (b) Examination — Oregon laws & rules: \$50.
- (c) Original issuance of registration (including by reciprocity): \$225 for one year.
- (d) Permits and waivers: \$150.
- (e) Renewal of registration: \$225 for one year.
- (f) Delinquent (late) renewal of registration: \$25 for the first month in expired status, and \$10 each month thereafter while in an expired status.
- (g) Reinstatement: \$150.
- (h) Replacement of registration, including name change: \$25.
- (i) Duplicate registration document: \$25 per copy with maximum of three.
- (j) Affidavit of licensure: \$50.
- (k) An additional \$25 administrative processing fee will be assessed if a NSF or non-negotiable instrument is received for payment of fees, penalties and charges. Refer to OAR 331-010-0010.

Stat. Auth.: 1999 OL Ch. 736, Sec. 5(3) & (4) & Sec. 10
Stats. Implemented: 1999 OL Ch. 736, Sec. 5(3) & (4) & Sec. 10
Hist.: HDLB 2-1996, f. 12-13-96, cert. ef. 1-1-97; HDLP 1-2000(Temp), f. 2-14-00, cert. ef. 2-15-00 thru 8-11-00; Administrative correction 3-16-00; HDLP 3-2000, f. 7-26-00, cert. ef. 8-1-00; HLO 3-2004, f. 6-29-04, cert. ef. 7-1-04; HLA 2-2006, f. 11-30-06, cert. ef. 12-1-06; HLA 3-2008, f. 9-15-08, cert. ef. 10-1-08; HLA 5-2011(Temp), f. & cert. ef. 8-1-11 thru 1-28-12; HLA 11-2011, f. 10-14-11, cert. ef. 10-15-11

DIVISION 120

BOARD OF ATHLETIC TRAINERS: GENERAL ADMINISTRATION

331-120-0001

Definitions

The following definitions apply to OAR 331-120-0001 through 331-160-0015.

- (1) “Agency” means the Oregon Health Licensing Agency.
- (2) “Board of Certification, Inc.” (BOC) means the national organization that is accredited by the National Commission for Certifying Agencies that provides a certification program for the entry-level athletic trainer and establishes requirements for maintaining status as a certified athletic trainer (ATC).
- (3) “Registration” means the document issued by the agency authorizing the holder to practice athletic training under ORS 688.730 and use the title “Athletic Trainer, Registered,” and the abbreviation: “ATR.”

Stat. Auth.: ORS 676.615, 688.709, 688.715,
Stats. Implemented: ORS 688.715, 688.718, 688.720
Hist.: HLA 12-2012, f. 8-16-12, cert. ef. 8-17-12

DIVISION 130

APPLICATION AND QUALIFICATION REQUIREMENTS

331-130-0001

Application Requirements

An individual applying for registration to practice athletic training must:

- (1) Meet the requirements of OAR 331 division 30.

(2) Submit a completed application form prescribed by the agency, which must contain the information listed in OAR 331-030-0000 and be accompanied by payment of the required application and registration fees.

(3) In addition to requirements listed in subsections (1) and (2) of this rule, an applicant must provide documentation of one of the following pathways:

(a) Licensure Pathway 1 — Qualification through examination. An applicant must submit:

(A) Official transcripts demonstrating that the individual holds a bachelor’s degree from a regionally accredited four year college or university and has completed an athletic training education program accredited by the Commission on Accreditation of Athletic Training Education, or has been approved or recognized by the Board;

(B) Evidence of prescribed educational and clinical experience as required by ORS 688.720, and OAR 331-130-0001;

(C) Official documentation of a passing score of the BOC examination or documentation of successful completion of an equivalent examination approved or recognized by the Board;

(D) Evidence that the applicant is 18 years old or older; and

(E) Evidence demonstrating current certification in cardiopulmonary resuscitation (CPR) including:

(i) Adult & Pediatric CPR;

(ii) Automated external defibrillator AED;

(iii) 2nd Rescuer CPR;

(iv) Airway Obstruction; and

(v) Barrier Devices (e.g., pocket mask, bag valve mask).

(b) Licensure Pathway 2 — Licensure through reciprocity: An applicant must submit:

(A) An Affidavit of Registration demonstrating proof of current registration, which is active with no current or pending disciplinary action. The registration must have been issued by another state or territory of the United States and the requirements be equivalent to those in ORS 688.720;

(B) Evidence that the applicant is 18 years old or older; and

(C) Evidence demonstrating current certification in cardiopulmonary resuscitation (CPR) for including:

(i) Adult & Pediatric CPR;

(ii) Automated external defibrillator AED;

(iii) 2nd Rescuer CPR;

(iv) Airway Obstruction; and

(v) Barrier Devices (e.g., pocket mask, bag valve mask).

(4) An applicant with a current athletic training licensing credential issued from another state or territory of the United States must arrange for a completed Affidavit of Registration, issued by the credentialing state, to be mailed directly to the Agency. The Affidavit must attest to the applicant’s registration record and indicate successful completion of the BOC examination or another examination approved by the Board.

Stat. Auth.: ORS 676.615, 688.709, 688.715,
Stats. Implemented: ORS 688.715, 688.718, 688.720
Hist.: HLA 12-2012, f. 8-16-12, cert. ef. 8-17-12

331-130-0005

Registration Required; Exception

To practice athletic training in the state of Oregon, individuals must be registered in accordance with ORS 688.718.

Stat. Auth.: ORS 676.615, 688.709, 688.715,
Stats. Implemented: ORS 688.715, 688.718, 688.720
Hist.: HLA 12-2012, f. 8-16-12, cert. ef. 8-17-12

331-130-0011

Registration Issuance and Renewal

(1) REGISTRATION: A registrant is subject to the provisions of OAR Chapter 331, division 30 regarding the issuance and renewal of a registration, and to provisions regarding authorization to practice, identification, and requirements for issuance of a duplicate registration.

(2) LICENSE RENEWAL: Registration renewal must be made prior to the registration entering inactive status. The registrant must submit the following:

(a) Renewal application form;

(b) Payment of required renewal fee;

(c) Attestation of having obtained required continuing education;

and

(d) In addition to any other required continuing education, the registrant must submit evidence of current certification in cardiopulmonary resuscitation pursuant to OAR 331-130-0001.

(3) **INACTIVE REGISTRATION RENEWAL:** Registration renewal made after the registration enters inactive status. A registration may be inactive for up to three years. To renew inactive registration, the registrant must submit the following:

(a) Renewal application form;

(b) Payment of delinquency and renewal fees pursuant to OAR 331-140-0000;

(c) Attestation of having obtained required continuing education; and

(d) In addition to any other required continuing education, the registrant must submit evidence of current certification in cardiopulmonary resuscitation pursuant to OAR 331-130-0001.

(4) **EXPIRED REGISTRATION:** A registration that has been inactive for more than three years is expired and must meet the requirements listed in OAR 331-130-0001.

(5) A registrant failing to meet continuing education requirements listed under OAR 331-150-0005 must reapply and meet requirements pursuant to OAR 331-130-0001.

(6) A registrant may not practice with an inactive or expired registration.

Stat. Auth.: ORS 676.615, 688.709, 688.715,

Stats. Implemented: ORS 688.715, 688.718, 688.720

Hist.: HLA 12-2012, f. 8-16-12, cert. ef. 8-17-12

331-130-0015

Registration Display and Posting Requirements

(1) Registrants must show proof of valid registration upon request or post the registration document in public view at the athletic trainer's primary workplace.

(2) A registrant may temporarily conceal the address printed on the registration document with a covering that is removable. A registrant must carry the registration identification card (pocket card), or post the official registration in plain view any time services are being provided.

Stat. Auth.: ORS 676.615, 688.709, 688.715,

Stats. Implemented: ORS 688.715, 688.718, 688.720

Hist.: HLA 12-2012, f. 8-16-12, cert. ef. 8-17-12

DIVISION 150

CONTINUING EDUCATION

331-150-0000

Continued Competency

(1) To ensure continuing efforts on the part of Oregon registered athletic trainers to remain current with new developments in athletic training and to encourage diversified training and qualifications in the profession, continuing education is required as a condition of registration.

(2) Continuing education experiences are programs beyond the basic education required to obtain registration and that are designed to promote and enrich knowledge, improve skills, and develop attitudes for the enhancement of the practices of registered athletic trainers, thus improving athletic training care to the public.

(3) Continuing education requirements apply whether the applicant renewing registration is living or working within Oregon or outside of the state, so long as Oregon registration is maintained.

Stat. Auth.: ORS 676.615, 688.709, 688.715,

Stats. Implemented: ORS 688.715, 688.718, 688.720

Hist.: HLA 12-2012, f. 8-16-12, cert. ef. 8-17-12

331-150-0005

Continuing Education Requirements

(1) To maintain registration, athletic trainers must complete a minimum of 10 hours of approved continuing education each year. Credit hours obtained in excess of those required for the one-year reporting period may not be carried forward. A registrant's continuing education requirements remain in effect during the time registration is inactive.

(2) Each registrant shall document compliance with the continuing education requirement through attestation on the registration

renewal application. Registrants are subject to provisions of OAR 331-150-0010 pertaining to periodic audit of continuing education.

(3) Approved continuing education must be obtained by participation in or attendance at a course provided by an accredited college or university, a course or program approved by the BOC or an agency pre-approved course or program.

(4) Continuing education must address subject matter related to athletic training in accordance with ORS 688.701 through 688.734.

(5) CE credit will be awarded based on the following criteria:

(a) Completion and passing of academic courses related to athletic training taken from an accredited college or university are awarded 15 hours for each semester-based credit earned, 14 hours for each trimester-based credit earned or 10 hours for each quarter-based credit earned; and

(b) Courses that do not meet standards as set forth in paragraph

(a) of this subsection, such as workshops, symposiums, seminars, laboratory exercises, professional courses, or any applied experience with or without formal classroom work must be pre-approved by the agency or by BOC and may be assigned credit at the rate of one hour for each hour of attendance.

(6) Registrants must complete two hours of continuing education specifically on Concussion and Traumatic Brain Injury once every three years.

(7) Documentation supporting compliance with continuing education requirements must be maintained for a period of three years following renewal, and must be available to the agency upon request.

Stat. Auth.: ORS 676.615, 688.709, 688.715,

Stats. Implemented: ORS 688.715, 688.718, 688.720

Hist.: HLA 12-2012, f. 8-16-12, cert. ef. 8-17-12

331-150-0010

Continuing Education: Audit, Required Documentation and Sanctions

(1) The Oregon Health Licensing Agency will audit a percentage of registrants, as determined by the Board, to verify compliance with continuing education requirements of this rule.

(2) Registrants notified of selection for audit of continuing education attestation shall submit to the agency, within 30 calendar days from the date of issuance of the notification, satisfactory evidence of participation in required continuing education in accordance with OAR 331-150-0005.

(3) If selected for audit, the registrant must provide documentation of the required continuing education, which must include:

(a) For courses provided by an accredited college or university — A course syllabus and an official transcript from the accredited college or university;

(b) For BOC approved programs or courses — A certificate of completion that includes the BOC approval number; or

(c) For agency pre-approved programs or courses — A certificate of completion or other agency approved documentation that includes the agency pre-approval number.

(4) If documentation of continuing education is incomplete, the registrant has an additional 30 calendar days from the date of notice of incompleteness to submit further documentation to substantiate having completed the required continuing education.

(5) Failure to meet continuing education requirements shall constitute grounds for disciplinary action, which may include, but is not limited to, assessment of a civil penalty and suspension or revocation of registration.

Stat. Auth.: ORS 676.615, 688.709, 688.715,

Stats. Implemented: ORS 688.715, 688.718, 688.720

Hist.: HLA 12-2012, f. 8-16-12, cert. ef. 8-17-12

DIVISION 160

PRACTICE STANDARDS

331-160-0005

Scope of Practice

The scope of practice of athletic training by a registered athletic trainer shall consist of the following:

(1) The education, instruction, application and monitoring of facts and circumstances required to protect the athlete from athletic injury, including but not limited to:

(a) The identification, through physical examinations or screening processes, of conditions that may pose a risk of injury, illness or disease to an athlete.

(b) The supervision and maintenance of athletic equipment to assure safety.

(2) The recognition, evaluation and care of injuries and illness occurring during athletic events or in the practice for athletic events including but not limited to the following:

(a) Performance of strength testing using mechanical devices or other standard techniques;

(b) Application of tape, braces and protective devices to prevent or treat injury;

(c) Administration of standard techniques of first aid;

(d) Use of emergency care equipment to aid the injured athlete by facilitating safe transportation to an appropriate medical facility;

(e) Determination of the level of functional capacity of an injured athlete in order to establish the extent of an injury; and

(f) Determination of the level of functional capacity of an injured or ill athlete to participate.

(3) The gathering and accurate recording of all information required in the assessment of athletic injuries.

(4) The development and implementation of an appropriate course of rehabilitation or reconditioning by the use of therapeutic modalities, including but not limited to: water, cold, heat, electrical, mechanical and acoustical devices, massage, manual techniques, gait training exercise, and physical capacity functional programs which are determined to be needed to facilitate recovery, restore athletic function or performance;

(5) Dispensation of non-prescription medication and application of topical non-prescription medication;

(6) The determination and implementation of a plan for appropriate health care administration.

(7) Referral of an athlete to appropriate health care provider as needed.

(8) Organization of a medical care service delivery system for athletes when needed.

(9) Establishment of plans to manage an athlete's medical emergencies;

(10) The education or providing of athletic training guidance to athletes for the purpose of facilitating recovery, function and performance of the athlete.

Stat. Auth.: ORS 676.615, 688.709, 688.715,

Stats. Implemented: ORS 688.715, 688.718, 688.720

Hist.: HLA 12-2012, f. 8-16-12, cert. ef. 8-17-12

331-160-0010

Standards of Practice

Athletic trainers shall adhere to the following standards of professional conduct:

(1) Physician Collaboration: Athletic trainers are required to collaborate with a physician in the treatment of an athletic injury as provided in OAR 331-160-0015.

(2) Registered Athletic Trainers shall be responsible for the conduct and performance of student assistants under their supervision.

(3) Documentation: All services are documented in writing by the Athletic Trainer and are part of the Athletic Trainer's record for the athlete. The Athletic Trainer accepts responsibility for chronologically recording details of the patient's health status and treatment, signing and dating each entry.

(4) The patient's record shall include, but not be limited to:

(a) Athlete's name and any other identifying information;

(b) Referral source, as applicable;

(c) Initial and subsequent assessments;

(d) Treatment plan, including methods used, results and plan revisions;

(e) Documentation of discontinuation of treatment and final summary.

(5) Records must be maintained for no less than seven years after discharge. All records are subject to review by the agency.

(6) All records must be legibly written or typed, dated and signed.

(7) Confidentiality: Athletic trainers are required to maintain confidentiality in accordance with all applicable laws.

(8) Initial Assessment: Prior to treatment, athletic trainers are required to assess the athlete's status, history, and level of functioning.

(9) Treatment Program Planning: The treatment program objectives must include goals, expectations and measures to determine the effectiveness of the program.

(10) Athletic trainers are required to observe the Occupational Safety and Health Act Blood Borne Pathogens Standards under 29 CFR 1910.1030 when providing services.

(11) Practicing athletic training or offering to perform services beyond the scope of practice permitted by law and defined in ORS 688.701, is prohibited.

(12) Performing services that have not been authorized by the athlete or the athlete's legal representative is prohibited.

Stat. Auth.: ORS 676.615, 688.709, 688.715,

Stats. Implemented: ORS 688.715, 688.718, 688.720

Hist.: HLA 12-2012, f. 8-16-12, cert. ef. 8-17-12

331-160-0015

Collaboration of Athletic Trainers and Physicians

(1) "Collaboration" as used in this section means consultation, correspondence, or referral between an athletic trainer and a physician. Collaboration may be initiated by the athletic trainer or physician, and consists of oral or written communication between the parties or an appropriate representative of the physician. "Collaboration" as used in OAR 331-160-0010 and this section, does not mean providing care on behalf of, jointly, or in concert with one another.

(2) "Consultation" as used in this section means discussing or sharing information with another health care provider that is consistent with the requirements of state and federal law regarding confidentiality for the purposes of obtaining information or recommendations for the provision of care to the athlete.

(3) "Referral" as used in this section means directing the athlete to other resources for purposes of care, treatment, assessment or intervention.

(4) An athletic trainer must collaborate with a physician when the athletic injury is beyond the athletic trainer's scope of practice or expertise, or in those instances where the injury is not responding to treatment.

(5) The athletic trainer must appropriately record collaboration with a physician regarding an athlete or athletic injury in an acceptable manner, such as notation on injury reports, medical records, or progress reports.

(6) Nothing in this section or these rules shall be construed to prevent a physician from employing, directing, supervising, establishing protocols for, or otherwise assisting a registered athletic trainer in the practice of athletic training consistent with the scope of practice and professional standards of each practitioner.

Stat. Auth.: ORS 676.615, 688.709, 688.715,

Stats. Implemented: ORS 688.715, 688.718, 688.720

Hist.: HLA 12-2012, f. 8-16-12, cert. ef. 8-17-12

DIVISION 405

GENERAL ADMINISTRATION

331-405-0020

Definitions

The following definitions apply to OAR chapter 331, divisions 400 through 430:

(1) "Affidavit of Licensure" means an original document verifying licensing history and status, including information disclosing all unresolved or outstanding penalties and disciplinary actions. The document is issued and signed by the regulatory authority in the state which issued the license with an official seal or stamp affixed to the document; it is not the certificate or license form issued which authorizes the holder to practice.

(2) "Agency" means the Oregon Health Licensing Agency. The agency is responsible for the budget, personnel, performance-based outcomes, consumer protection, fee collection, mediation, complaint resolution, discipline, rulemaking and record keeping.

(3) "Board" means — The State Board of Denture Technology.

(4) "Clinical procedures" means the tasks and activities that are set forth in ORS 680.500(5)(b).

(5) “Contact hours” means actual academic, classroom, or course work time, including but not limited to workshops, symposiums, seminars, or laboratory exercises. Contact hours do not include travel time to or from the training site, registration or check-in periods, breaks or lunch periods.

(6) “Dentist” as used in 680.545, OAR 331-410-0000 and 331-410-0010 means a person licensed to practice in the jurisdiction in which the practice occurred.

(7) “Direct supervision” means that the supervisor is present in the facility for the purpose of providing oversight and training and is responsible for guiding and monitoring the performance of the individual supervised. Training under the direct supervision of a school means under the direct supervision of a teacher employed by the school.

(8) “Director” means the Director of the Oregon Health Licensing Agency.

(9) “Employed by” means other than independent contractor relationship and does not require remuneration.

(10) “Equivalent” means substantially comparable but not identical, covering the same subject matter.

(11) “Examination”, as used in Oregon laws 2005, Chapter 415, Section 2 and OAR 331-410-0020 and 331-410-0030, means a denture technology written or practical examination administered by the Oregon Health Licensing Agency, or a denture technology examination administered by another licensing authority that has been recognized and approved by the Board as being equivalent to the Oregon examination.

(12) “Informed Consent” means the consent obtained following a thorough and easily understood explanation to the patient, or patient’s guardian, of the proposed procedures, any available alternative procedures and any risks associated with the procedures. Following the explanation, the licensee shall ask the patient, or the patient’s guardian, if there are any questions. The licensee shall provide thorough and easily understood answers to questions asked.

(13) “Laboratory procedures” means those tasks and activities that are set forth in ORS 680.500(5)(a).

(14) “Official transcript” means an original document certified by a school or educational institution, on a form approved by the Department of Education or regulating authority, delivered from the school to the agency by mail or courier, which includes:

- (a) School name and location;
- (b) Student’s name, address and date of birth;
- (c) Enrollment and completion or termination dates;
- (d) Hours and types of course work;
- (e) Final examination scores;
- (f) School seal or stamp;
- (g) Signature of authorized school representative or registrar.

(15) “Oral pathology” means the pathology that deals with the nature, identification, and management of diseases affecting the oral and maxillofacial regions. It is a science that investigates the causes, processes, and effects of these diseases.

(16) “Premises” means the structure in which laboratory and/or clinical procedures are performed, not necessarily the same room in which procedures take place.

(17) “Predominant” means located within the place of business and positioned so it may be seen and read without difficulty by consumers who have entered the place of business.

(18) “Restoration” means licensure of a previously licensed person, who has not made application for renewal within three years of expiration of the previous license.

(19) “1,000 hours in the practice of denture technology under direct supervision” or “1,000 hours of clinical and laboratory training in an approved work experience program” means engaging in the clinical and laboratory procedures of the practice of denture technology, over a period of not less than six months and not more than two years pursuant to ORS 680.510(3), with a minimum of 400 hours devoted to clinical procedures. The 1,000 hours under direct supervision shall include construction of no less than 40 units of upper or lower dentures, with a set counting as two units, and must include at least one each of the following: full, immediate, removable partial, removable implant and over-denture.

(20) “Treatment” means the clinical or laboratory procedures in the practice of denture technology.

(21) “Valid license” means the authority to practice pursuant to ORS 680 that has not been revoked, suspended, or expired without renewal.

Stat. Auth.: ORS 680.565
Stats. Implemented: ORS 680.565
Hist.: HD 11-1979(Temp), f. & ef. 8-23-79; HD 2-1980, f. & ef. 2-14-80; HD 12-1981(Temp), f. & ef. 7-15-81; HD 1-1983, f. & ef. 1-20-83; HD 4-1988, f. & cert. ef. 3-4-88; HD 25-1988 (Temp), f. & cert. ef. 11-1-88; HD 4-1989, f. & cert. ef. 6-1-89; HD 10-1989, f. & cert. ef. 11-21-89; HD 13-1991(Temp), f. & cert. ef. 9-30-91; HD 3-1992, f. & cert. ef. 3-25-92; HD 22-1993, f. 12-30-93, cert. ef. 1-1-94; HDLP 3-1998, f. 6-26-98, cert. ef. 7-1-98, Renumbered from 333-020-0005; HDLP 1-2001, f. 3-21-01, cert. ef. 4-1-01; HLO 1-2003, f. 1-21-03, cert. ef. 2-1-03; HLO 2-2004, f. 6-29-04, cert. ef. 7-1-04; HLO 2-2005, f. 12-15-05, cert. ef. 1-1-06

331-405-0030 Fees

(1) Applicants and licensees are subject to the provisions of OAR 331-010-0010 and 331-010-0020 regarding the payment of fees, penalties and charges.

(2) Fees established by the Oregon Health Licensing Agency are as follows:

- (a) Application:
- (A) License: \$350.
- (B) License by reciprocity: \$450.
- (C) Training registration: \$200.
- (b) Examination:
- (A) Oregon laws & rules: \$50.
- (B) Written: \$350.
- (C) Practical: \$650.
- (c) Original issuance of license (including by reciprocity): \$700.
- (d) Renewal of license: \$700.
- (e) Delinquent (late) renewal of license: \$25 for the first month in expired status, and \$10 each month thereafter while in an expired status.
- (f) Replacement of license, including name change: \$25.
- (g) Duplicate license document: \$25 per copy with maximum of three.
- (h) Affidavit of licensure: \$50.
- (i) An additional \$25 Administrative Processing fee will be assessed if a NSF or non-negotiable instrument is received for payment of fees, penalties and charges. Refer to OAR 331-010-0010.

Stat. Auth.: ORS 676.605, 676.615 & 680.525
Stats. Implemented: ORS 676.605, 676.615 & 680.525
Hist.: HD 11-1979(Temp), f. & ef. 8-23-79; HD 2-1980, f. & ef. 2-14-80; HD 11-1981(Temp), f. & ef. 7-15-81; HD 9-1985(Temp), f. & ef. 5-24-85; HD 15-1985, f. & ef. 9-4-85; HD 25-1988(Temp), f. & cert. ef. 11-1-88; HD 4-1989, f. & cert. ef. 6-1-89; HD 13-1991(Temp), f. & cert. ef. 9-30-91; HD 3-1992, f. & cert. ef. 3-25-92; HD 22-1993, f. 12-30-93, cert. ef. 1-1-94; HDLP 3-1998, f. 6-26-98, cert. ef. 7-1-98, Renumbered from 333-020-0035; HDLP 1-2001, f. 3-21-01, cert. ef. 4-1-01; HLO 3-2003, f. 5-6-03, cert. ef. 5-15-03; HLO 2-2004, f. 6-29-04, cert. ef. 7-1-04; HLO 2-2005, f. 12-15-05, cert. ef. 1-1-06; HLA 5-2008, f. 9-15-08, cert. ef. 10-1-08

331-405-0045 Allocation of Responsibility

As set forth in ORS 680.556, the State Board of Denture Technology advises the Oregon Health Licensing Agency on matters relating to the practice of denture technology. The Director controls the regulatory operations and has decision-making authority on all substantive matters and is responsible for the performance of the agency as defined in 686.610.

Stat. Auth.: ORS 676.605, 676.615 & 680.525
Stats. Implemented: ORS 676.605, 676.615 & 680.525
Hist.: HLO 2-2005, f. 12-15-05, cert. ef. 1-1-06

DIVISION 410

LICENSURE

331-410-0000 Training

(1) Training, or formal education, required for licensure is a planned sequence of instruction of specific content, pursuant to ORS 680.515, structured to meet stated curriculum objectives which includes evaluation of attainment of those objectives; offered by a post-secondary educational institution or equivalent training as determined following evaluation by educational professional(s) from the Governor’s Office of Education Work Force Policy/Office of Degree Authorization. The Governor’s Office of Education and Work Force

Policy/Office of Degree Authorization will be consulted in the evaluation of the program, including but not limited to school accreditation, instructor credentials, and lecture and lab hours as they equate to standard academic credit hours.

(2) The education or training to be approved by the agency pursuant to ORS 680.515(2) in consultation with the Board, shall meet the curriculum objectives as established by the agency. Current lists of the curriculum objectives and approved training courses are available at the agency during regular business hours.

(3) All individuals or institutions requesting approval of a course or training program must submit a copy of the curriculum, a list of educational materials, books audiovisual aids, and a copy of handouts and tests to the agency for review to ensure the program meets established training standards and curriculum objectives. The following conditions will apply:

(a) No curriculum shall be approved without submission of complete curriculum documentation;

(b) The agency shall retain a copy of the approved curriculum on file as part of the official permanent record;

(c) Approved education and training program curricula shall be reevaluated for approval every three years or when any portion of the curriculum is modified, or where changes in denture technology or health practices make it necessary. Approved programs existing on the effective date of this rule are subject to immediate re-evaluation, whichever occurs first; and

(d) The agency shall incur any reasonable duplication costs associated with complying with the provisions mandated in ORS 680.515.

(4) To qualify as "equivalent supervised experience" under ORS 680.515(1)(b) or as an "approved work experience program" under 680.515(1)(c), experience must be under the direct supervision of an approved school, of a dentist, or of a denturist. If the work experience is under the direct supervision of a dentist or denturist, the supervising dentist or denturist must:

(a) Apply in advance on a form approved by the agency, and obtain approval from the agency, before beginning the direct supervision;

(b) Hold a valid license to practice and have been in practice for at least the last three years;

(c) Hold an oral pathology endorsement, if the supervisor is a denturist;

(d) Operate a clinic and an on-site laboratory where the direct supervision and training will occur;

(e) Certify in writing to the agency that the facility where the training will take place complies with OAR chapter 331, division 420, Practice Standards;

(f) Supervise no more than two denturist trainees at a time;

(g) Disclose to the agency all prior disciplinary action by their licensing board and, if previously disciplined by their licensing board, obtain Board approval prior to any supervising denturist trainee;

(h) Provide no more than two years of direct supervision to any individual denturist trainee undergoing the initial training required in ORS 680.515(1)(b), or no more than one year of direct supervision to any applicant undergoing additional clinical training required in ORS 680.515(1)(c);

(i) Obtain signed informed consent from a client or patient before a denturist trainee may perform services for the client or patient;

(j) Ensure that a denturist trainee is clearly identified as a trainee to clients and patients.

(5) Credit for courses completed within the five years immediately prior to making application, which cover those subjects listed in ORS 680.515(1)(a), may be counted toward completion of schooling requirements for a denture technology program.

(6) Documentation to prove completion of an Associate Degree program in denture technology or the equivalent program, shall be official school transcripts from the agency approved schools, and may include published course outlines showing that training included curriculum objectives as determined by the agency in consultation with the Board and the Governor's Office of Education Work Force Policy/Office of Degree Authorization.

(7) Documentation to prove additional training to satisfy ORS 680.515(1)(b) in a work experience program shall be:

(a) Official transcripts from the approved school, and a description of training content, hours of clinical and laboratory training, exam-

ination scores, school location, dates of attendance, and the name of the supervisor; or

(b) Signed statement from the dentist or denturist certifying dates of training, places of employment, description of training content, and verification that work included both clinical procedures and laboratory procedures.

(8) Any denturist trainee who makes more than two (2) changes in supervision must receive approval from the Board prior to making another change in their supervision and training.

Stat. Auth.: ORS 676.605, 676.615 & 680.515

Stats. Implemented: ORS 676.605, 676.615 & 680.515

Hist.: HD 11-1979(Temp), f. & ef. 8-23-79; HD 2-1980, f. & ef. 2-14-80; HD 1-1983, f. & ef. 1-20-83; HD 4-1989, f. & cert. ef. 6-1-89; HD 10-1989, f. & cert. ef. 11-21-89; HD 13-1991(Temp), f. & cert. ef. 9-30-91; HD 3-1992, f. & cert. ef. 3-25-92; HD 22-1993, f. 12-30-93, cert. ef. 1-1-94; HDLP 3-1998, f. 6-26-98, cert. ef. 7-1-98, Renumbered from 333-020-0040; HDLP 1-2001, f. 3-21-01, cert. ef. 4-1-01; HLO 1-2003, f. 1-21-03, cert. ef. 2-1-03; HLO 2-2004, f. 6-29-04, cert. ef. 7-1-04; HLO 2-2005, f. 12-15-05, cert. ef. 1-1-06

331-410-0010

Documentation of Experience

(1) Applicants shall document satisfactory completion of at least 1,000 hours of required work experience in the practice of denture technology pursuant to ORS 680.515(1)(b), under the direct supervision of an approved school, a licensed dentist or a licensed denturist, while employed by the dentist or denturist.

(2) Any person making application shall submit documentation of denture technology experience or equivalent in practice as follows:

(a) For practice under the direct supervision of an approved school, transcript or completion document from the school certifying at least 1,000 hours under direct supervision.

(b) For practice in the employment of a dentist or denturist, a statement on forms provided by the Oregon Health Licensing Agency of verification of employment and practice from the dentist or denturist that includes the dates of employment, number of hours worked in each category, and number of denture units constructed and fitted. The statement shall be signed by the dentist or denturist and the individual who received training. The statement shall be mailed or delivered from the dentist or denturist to the agency.

(3) Documentation of denture technology experience will not be accepted if it is incomplete, not signed or includes work experience obtained prior to approval of the direct supervision and training relationship by the Board under OAR 331-410-0000(4).

Stat. Auth.: ORS 680.515 & 680.565

Stats. Implemented: ORS 680.515 & 680.565

Hist.: HD 11-1979(Temp), f. & ef. 8-23-79; HD 2-1980, f. & ef. 2-14-80; HD 25-1988(Temp), f. & cert. ef. 11-1-88; HD 4-1989, f. & cert. ef. 6-1-89; HD 10-1989, f. & cert. ef. 11-21-89; HD 3-1992, f. & cert. ef. 3-25-92; HD 22-1993, f. 12-30-93, cert. ef. 1-1-94; HDLP 3-1998, f. 6-26-98, cert. ef. 7-1-98, Renumbered from 333-020-0025; HDLP 1-2001, f. 3-21-01, cert. ef. 4-1-01; HLO 2-2004, f. 6-29-04, cert. ef. 7-1-04; HLO 2-2005, f. 12-15-05, cert. ef. 1-1-06

331-410-0020

Application Requirements

(1) An applicant for a license to practice denture technology must:

(a) Comply with the requirements of OAR 331-030-0000;

(b) Submit a completed application on a form prescribed by the agency;

(c) Pay the fees required by OAR 331-405-0030; and

(d) Submit documentation establishing completion of the requirements of one of the three pathways described in this rule.

(2) PATHWAY ONE Approved Education and Training with an Oregon Examination. An applicant may qualify for licensure by demonstrating:

(a) Completion of a program of education that has been approved by the agency under OAR 331-410-0000;

(b) Completion of 1,000 hours of practice in denture technology under direct supervision of an approved school or the equivalent supervised experience described in OAR 331-410-0000(4); and

(c) Successful completion of the Oregon written and practical examination described in OAR 331-410-0030.

(3) PATHWAY TWO Approved Education and Training with an Examination Recognized or Approved by the Board. An applicant may qualify for licensure by demonstrating:

(a) Completion of a program of education that has been approved by the agency under OAR 331-410-0000;

(b) Completion of 1,000 hours of practice in denture technology under direct supervision of an approved school or the equivalent supervised experience described in OAR 331-410-0000(4); and

(c) Successful completion of a written and practical examination approved or recognized by the Board pursuant to ORS 680.515(1)(c).

(4) PATHWAY THREE License by Credential. An applicant who is licensed to practice denture technology in another state may qualify for licensure in Oregon by:

(a) Satisfying the requirements of Oregon Laws 2005, chapter 415, section 2;

(b) Submitting a signed and completed form prescribed by the agency to document the hours of practice required by Oregon Laws 2005, chapter 415, section 2(4);

(c) Arranging for the licensing authority of the state in which the applicant is licensed to send directly to the agency an original "Affidavit of Licensure" that:

(A) Verifies that the applicant holds a current valid license in good standing to practice denture technology in that state;

(B) Describes the applicant's history of discipline by the licensing authority, including a description of all prior disciplinary actions, all unresolved complaints, and all pending disciplinary actions; and

(C) Is signed before a notary by the person preparing the "Affidavit of Licensure" and sealed with the official seal or stamp of the licensing authority.

(5) The "Affidavit of Licensure" described in paragraph (4)(c) of this rule may be transmitted electronically to the agency so long as the affidavit is transmitted directly from the licensing authority of the other state. The applicant must pay any fee charged by the licensing authority of the other state for producing and transmitting the affidavit.

(6) Any application that is not successfully completed within two years of the initial application date or the date on which the last examination was taken, whichever is later, will be treated by the agency as withdrawn, and the applicant must submit a new application, new supporting documentation, and new application fees to apply for licensure.

Stat. Auth.: ORS 680.515 & 680.565

Stats. Implemented: ORS 680.515 & 680.565

Hist.: HD 11-1979(Temp), f. & ef. 8-23-79; HD 2-1980, f. & ef. 2-14-80; HD 25-1989(Temp), f. & cert. ef. 11-1-88; HD 4-1989, f. & cert. ef. 6-1-89; HD 10-1989, f. & cert. ef. 11-21-89; HD 13-1991(Temp), f. & cert. ef. 9-30-91; HD 3-1992, f. & cert. ef. 3-25-92; HD 22-1993, f. 12-30-93, cert. ef. 1-1-94; HDLP 1-2001, f. 3-21-01, cert. ef. 7-1-98, Renumbered from 333-020-0015; HDLP 1-2001, f. 3-21-01, cert. ef. 4-1-01; HDLP 1-2002, f. 5-31-02, cert. ef. 6-1-02; HLO 2-2004, f. 6-29-04, cert. ef. 7-1-04; HLO 2-2005, f. 12-15-05, cert. ef. 1-1-06

331-410-0030

Examinations

(1) The agency will notify qualified applicants of their eligibility to take the Oregon written and practical licensing examinations. Applicants must take both parts of the examination on their initial attempt, unless the applicant has previously completed and passed a board approved practical examination before submitting application for Oregon licensure.

(2) The Oregon licensing examination consists of two parts: a written examination and a practical examination:

(a) The written examination is comprised of multiple-choice questions covering subject areas specified in ORS 680.515(1)(a) and questions on the Oregon laws and rules regulating the practice of denture technology.

(b) The practical examination requires the applicant to demonstrate skills required to practice denture technology, including but not limited to: patient evaluation, maxillary and mandibular custom tray and final impressions, maxillary and mandibular preliminary and final cast evaluation, evaluation of maxillary and mandibular wax-up on an articulator and evaluation of maxillary and mandibular functional wax try-in.

(3) Practical Exam Requirement: To be scheduled for an Oregon practical examination, applicants must submit documentation and pay required fees at least 30 calendar days prior to the examination date. A schedule of practical examination dates is available at the Oregon Health Licensing Agency.

(4) The Health Licensing Office will notify each applicant, in writing by regular US Postal Service, of the results of his/her examination score within 30 days from the date of the examination. Results will not be given by any other means.

(5) The applicant must satisfactorily complete all parts of the examination to pass. Those that fail may repeat the parts not passed

upon submission of a supplemental application for examination, examination fee for each part to be retaken, and documentation of additional training if applicable.

(6) Passing score for the written examination is 70 percent or higher. The practical examination is scored on a pass or fail basis. The portions will be scored individually, not added or averaged together.

(7) Passing scores will be maintained towards meeting licensure requirements only for the periods set forth in OAR 331-410-0020(6).

(8) Applicants taking the examination will be required to present government issued photographic identification such as a driver's license and their original Social Security card at the examination.

(9) Additional Clinical Training: As required in ORS 680.515(1)(c), the Board will prescribe additional hours of clinical and laboratory training in an approved work experience program for applicants who fail the Oregon practical examination.

(a) Additional hours of clinical and laboratory training must meet requirements of OAR 331-410-000(4).

(b) Notwithstanding any other rule, the applicant must complete the additional clinical and laboratory training within one year from the date of the failed practical examination.

(10) An applicant, who fails to pass the written or practical examination on the third attempt, must apply to the Board and receive authorization before application for re-examination will be approved. The Board may require the applicant to undergo additional training before taking the examination a fourth or subsequent time.

(11) Notwithstanding ORS 680.515(1)(c), failed sections of the examination may be retaken at the next available examination date and time as scheduling allows. Retaking a failed examination requires the applicant to register for the examination and submit payment of the examination fees.

Stat. Auth.: ORS 680.520 & 680.565

Stats. Implemented: ORS 680.520 & 680.565

Hist.: HD 11-1979(Temp), f. & ef. 8-23-79; HD 2-1980, f. & ef. 2-14-80; HD 1-1983, f. & ef. 1-20-83; HD 25-1988(Temp), f. & cert. ef. 11-1-88; HD 4-1989, f. & cert. ef. 6-1-89; HD 10-1989, f. & cert. ef. 11-21-89; HD 13-1991(Temp), f. & cert. ef. 9-30-91; HD 3-1992, f. & cert. ef. 3-25-92; HD 22-1993, f. 12-30-93, cert. ef. 1-1-94; HDLP 3-1998, f. 6-26-98, cert. ef. 7-1-98, Renumbered from 333-020-0030; HDLP 1-2001, f. 3-21-01, cert. ef. 4-1-01; HDLP 5-2001, f. & cert. ef. 12-14-01; HDLP 1-2002, f. 5-31-02, cert. ef. 6-1-02; HLO 2-2004, f. 6-29-04, cert. ef. 7-1-04; HLO 2-2005, f. 12-15-05, cert. ef. 1-1-06

331-410-0040

Examination Conduct; Disqualification

(1) Examinations conducted in Oregon are held in a designated area with restricted access. An applicant must obtain authorization from the agency before bringing any material or electronic equipment or devices into the examination. Receiving, attempting to receive, giving, or attempting to give assistance during the examination, including assistance from other individuals, from notes books or devices or taking unauthorized items into the examination area shall invalidate the examination and will result in forfeiture of the examination and fees.

(2) Examination Disqualification: A candidate may be immediately disqualified during or after the examination for conduct that interferes with the examination. Such conduct includes:

(a) Giving or attempting to give assistance to others in answering questions during the examination;

(b) Receiving or attempting to receive assistance during the examination, including assistance from other individuals from notes, books or devices to answer questions;

(c) Removing or attempting to remove any secure examination-related information, notes, or materials from the examination site;

(d) Failing to follow directions relative to the conduct of the examination;

(e) Exhibiting behavior which impedes the normal progress of the examination; and

(f) Endangering the health or safety of a person involved in the examination.

(3) Disqualification will invalidate the examination and result in forfeiture of the examination and fees. The candidate will be required to reapply, submit additional examination fees, and request in writing to schedule another examination. Reexamination will be scheduled at a date, time and place determined by the Director following the date of disqualification.

Stat. Auth.: ORS 680.520 & 680.565

Stats. Implemented: ORS 680.520 & 680.565

Chapter 331 Oregon Health Licensing Agency

Hist.: HDLP 3-1998, f. 6-26-98, cert. ef. 7-1-98; HDLP 1-2001, f. 3-21-01, cert. ef. 4-1-01; HLO 2-2004, f. 6-29-04, cert. ef. 7-1-04; HLO 2-2005, f. 12-15-05, cert. ef. 1-1-06

331-410-0050

Examination Review and Appeal

Pursuant to ORS 183.435, applicants who fail to attain licensure as a result of test scores are not entitled to a formal appeal or hearing. Practical examination results are not challengeable.

(1) Computer Examination Segment: Review of the written examination, conducted by use of a touch screen computerized system, is provided at the conclusion of each examination question/answer selection, or at the next available date and time as scheduling allows.

(2) Written Examination Segment: Review of failed written examination question/answer selections, conducted by use of paper/pencil and score sheet, is provided upon submitting written request to the agency within seven calendar days of the examination date.

(3) Procedures for reviewing a failed written examination may be obtained from the agency.

Stat. Auth.: ORS 680.520 & 680.565

Stats. Implemented: ORS 680.520 & 680.565

Hist.: HDLP 3-1998, f. 6-26-98, cert. ef. 7-1-98; HDLP 1-2001, f. 3-21-01, cert. ef. 4-1-01; HLO 2-2004, f. 6-29-04, cert. ef. 7-1-04

331-410-0060

Licensure Issuance

(1) Pursuant to ORS 680.505, a person shall not practice denture technology or claim to be a dentist including that a person shall not display a sign or in any way advertise or purport to be a license holder or to be engaged in the practice of denture technology without first obtaining a license under 680.515.

(2) Licensees are subject to the provisions of OAR 331-030-0010 regarding the issuance and renewal of a license, and to the provisions of 331-030-0020 regarding the authorization to practice, identification and the requirements for issuance of a duplicate authorization.

Stat. Auth.: ORS 676.605, 676.615, 680.525, 680.530 & 680.565

Stats. Implemented: ORS 676.605, 676.615, 680.525, 680.530 & 680.565

Hist.: HD 25-1988(Temp), f. & cert. ef. 11-1-88; HD 4-1989, f. & cert. ef. 6-1-89; HD 13-1991(Temp), f. & cert. ef. 9-30-91; HD 3-1992, f. & cert. ef. 3-25-92; HD 22-1993, f. 12-30-93, cert. ef. 1-1-94; HDLP 3-1998, f. 6-26-98, cert. ef. 7-1-98, Renumbered from 333-020-0032; HDLP 1-2001, f. 3-21-01, cert. ef. 4-1-01; HDLP 1-2002, f. 5-31-02, cert. ef. 6-1-02; HLO 2-2004, f. 6-29-04, cert. ef. 7-1-04

331-410-0065

License Renewal

(1) RENEWAL: The following are prerequisites to license renewal:

(a) The completed application for renewal submitted in advance of the license expiration date;

(b) The renewal fee; and

(c) Attestation of having obtained required continuing education pursuant to OAR 331-415-0010.

(2) LATE RENEWAL: Renewal applications received in the Health Licensing Office, or postmarked, within one year after the expiration date may be approved upon payment of the renewal and delinquency fees and required attestation of having obtained sufficient continuing education.

(3) RESTORATION: A person who submits a completed renewal application after one year but within three years from the date of expiration, may be granted a license upon payment of restoration and license fees, and submission of evidence of sufficient continuing education as required in OAR 331-415-0010. A person who does not meet continuing education requirements within the three-year reporting cycle, must reapply and meet all requirements for licensure in place at the time of application.

(4) RE-APPLICATION/QUALIFICATION: A person who fails to renew within three years following the date of expiration, may be granted a license upon reapplication, payment of license and/or examination fee(s), as applicable, and submission of evidence of clinical competence satisfactory to the Health Licensing Office as follows:

(a) Documentation, showing the person engaged in active practice of denture technology in another state or territory during at least two of the last three years preceding reapplication, verifying construction of no less than 40 units of upper or lower dentures (a set counting as two units), and must include at least one each of the fol-

lowing: full, immediate, removable partial, removable implant and over-denture. Documentation must include verification of work experience/employment and copies of patient treatment records; or

(b) Attain a passing score on the written and practical examination conducted by the Health Licensing Office, as prescribed by the Board.

(5) A person who previously held an Oregon dentist license without an oral pathology endorsement does not qualify for licensure under reapplication provisions in subsection (4) of this rule. A person must meet all requirements of OAR 331-410-0010 and 331-410-0020 to qualify for an Oregon dentist license.

Stat. Auth.: ORS 676.605, 676.615, 680.525, 680.530 & 680.565

Stats. Implemented: ORS 676.605, 676.615, 680.525, 680.530 & 680.565

Hist.: HDLP 1-2002, f. 5-31-02, cert. ef. 6-1-02; HLO 2-2004, f. 6-29-04, cert. ef. 7-1-04

331-410-0080

Oral Health Certificate

(1) Denturists licensed prior to January 1, 2004, who have not received an oral pathology endorsement as described in ORS 680.545 may not treat any person without a valid Oral Health Certificate for the person stating the person's oral cavity is substantially free from disease and mechanically sufficient to receive a denture.

(2) A valid Oral Health Certificate shall be in the form prescribed by the Health Licensing Office, signed by a licensed dentist or physician (M.D. or D.O.) stating that the person's cavity is substantially free from disease and mechanically sufficient to receive a denture, and show an examination of the oral cavity took place within 30 days of the date of commencing treatment.

(3) Oral Health Certificate forms are available at the agency.

Stat. Auth.: ORS 680.545

Stats. Implemented: ORS 680.545

Hist.: HD 12-1980(Temp), f. & ef. 9-29-80; HD 6-1981, f. & ef. 4-3-81; HD 4-1988, f. & cert. ef. 3-4-88; HD 4-1989, f. & cert. ef. 6-1-89; HD 3-1992, f. & cert. ef. 3-25-92; HD 22-1993, f. 12-30-93, cert. ef. 1-1-94; HDLP 3-1998, f. 6-26-98, cert. ef. 7-1-98, Renumbered from 333-020-0055; HDLP 1-2001, f. 3-21-01, cert. ef. 4-1-01; HLO 2-2004, f. 6-29-04, cert. ef. 7-1-04

331-410-0090

License Display

Denturists shall post their current license to practice denture technology in public view.

Stat. Auth.: ORS 680.565

Stats. Implemented: ORS 680.565

Hist.: HD 12-1980(Temp), f. & ef. 9-29-80; HD 6-1981, f. & ef. 4-3-81; HD 22-1993, f. 12-30-93, cert. ef. 1-1-94; HD 22-1993, f. 12-30-93, cert. ef. 1-1-94; HDLP 3-1998, f. 6-26-98, cert. ef. 7-1-98, Renumbered from 333-020-0060; HLO 2-2004, f. 6-29-04, cert. ef. 7-1-04

DIVISION 415

CONTINUING EDUCATION

331-415-0000

Purpose

(1) To ensure continuing efforts on the part of Oregon licensed denturists to remain current with new developments in the denture technology and health care field and to encourage diversified training and qualifications in the profession continuing education is required as a condition of licensure.

(2) Continuing education requirements apply whether the applicant renewing a license is living or working within Oregon or outside of the state so long as Oregon licensure is maintained.

(3) Continuing education is required for renewal, every two years, even if the dentist license has been inactive during that period.

Stat. Auth.: ORS 680.530

Stats. Implemented: ORS 680.530

Hist.: HDLP 3-1998, f. 6-26-98, cert. ef. 7-1-98; HLO 2-2004, f. 6-29-04, cert. ef. 7-1-04; HLA 5-2008, f. 9-15-08, cert. ef. 10-1-08

331-415-0010

Continuing Education Requirements

(1) Each dentist must complete 20 contact hours of continuing education every two years from the date of licensure to qualify for renewal of the dentist's license. Four of the required 20 hours must be directly related to partial denture services.

(2) Each denturist shall report compliance with the continuing education requirement through attestation on the license renewal document. Licensees shall be subject to the provisions of OAR 331-415-0020 pertaining to the periodic audit of continuing education.

(3) Continuing education includes attendance or participation at an instructional program presented, recognized, or under the auspices of any permanently organized institution, agency, or professional organization or association. For example, lectures, post-secondary school or post-graduate courses, scientific sessions at conventions, teaching (provided that no more than half the required hours be in teaching), or correspondence courses, or video tapes, or similar self-study provided an examination is taken and passed as part of the course.

(4) Subject matter shall be related specifically to denture technology as set forth in ORS 680.515(1)(a), the law and rules regulating licensed denturists, science, related dental practices, health care professional concerns such as infection control or medical emergencies, ethics, and business practices. A Board member will be designated to review the content of continuing education courses upon request by Oregon Health Licensing Agency.

(5) Proof of participation in required continuing education is the responsibility of the denturist. To ensure that adequate proof of attainment of required continuing education is available for audit or investigation by the agency, denturists shall maintain a record of attendance for two years following the two-year continuing education cycle and renewal of the denturist license.

(6) Hours obtained in excess of the 20 contact hours required each two-year period will not be carried forward as credit for the succeeding two-year continuing education requirement.

Stat. Auth.: ORS 676.605, 680.530 & 680.565

Stats. Implemented: ORS 676.605, 680.530 & 680.565

Hist.: HD 10-1989, f. & cert. ef. 11-21-89; HD 13-1991 (Temp), f. & cert. ef. 9-30-91; HD 3-1992, f. & cert. ef. 3-25-92; HD 22-1993, f. 12-30-93, cert. ef. 1-1-94; HDLP 3-1998, f. 6-26-98, cert. ef. 7-1-98, Renumbered from 333-020-0041; HDLP 1-2001, f. 3-21-01, cert. ef. 4-1-01; HLO 2-2004, f. 6-29-04, cert. ef. 7-1-04; HLA 5-2008, f. 9-15-08, cert. ef. 10-1-08

331-415-0020

Continuing Education: Audit, Required Documentation and Sanctions

(1) The Health Licensing Office will audit a select percentage of licensee records determined by the Board to verify compliance with continuing education requirements.

(2) Licensees notified of selection for audit of continuing education attestation shall submit to the agency, within 30 calendar days from the date of issuance of the notification, satisfactory evidence of participation in required continuing education in accordance with OAR 331-415-0010.

(3) Documentation of a certificate of completion of attendance at a program or course provided by the sponsor must include:

- (a) Name of sponsoring institution/association or organization;
- (b) Title of presentation and description of content;
- (c) Name of instructor or presenter;
- (d) Date of attendance and duration in hours;
- (e) Course agenda;
- (f) Official transcript, diploma, certificate, statement or affidavit from the sponsor, attesting to attendance.

(4) If documentation of continuing education is invalid or incomplete, the licensee must correct the deficiency within 30 calendar days from the date of notice. Failure to correct the deficiency within the prescribed time shall constitute grounds for disciplinary action.

(5) Misrepresentation of continuing education, or failing to meet continuing education requirements or documentation may result in disciplinary action, which may include but is not limited to assessment of a civil penalty and suspension or revocation of the license.

Stat. Auth.: ORS 680.565

Stats. Implemented: ORS 680.565

Hist.: HDLP 3-1998, f. 6-26-98, cert. ef. 7-1-98; HDLP 1-2002, f. 5-31-02, cert. ef. 6-1-02; HLO 2-2004, f. 6-29-04, cert. ef. 7-1-04

DIVISION 420

PRACTICE STANDARDS

331-420-0000

Practice Standards

Licensed denturists shall adhere to the following practice standards:

(1) Oral Health Certificate. Denturists must either have an oral pathology endorsement on their license, or if they have not qualified for and received the endorsement, must comply with requirements for obtaining an Oral Health Certificate as described in ORS 680.545 and OAR 331-410-0080.

(2) Patient Documentation. Licensed denturists must record, update and maintain documentation for each patient relevant to health history, clinical examinations and treatment, and financial data. Documentation shall be written or computerized. Records should include the following information:

(a) Patient data, including name, address, date and description of examination;

(b) Evidence of informed consent (may be in the form of an acronym such as "PARQ" to denote procedure, alternatives, risks and questions);

(c) Date and description of treatment or services rendered, and any treatment complications;

(d) Health history as applicable; and

(e) Any other information deemed appropriate to patient care.

(3) Clinical Examination. Licensed denturists must conduct and record a clinical examination of each patient that will include at a minimum, information relative to:

(a) Appearance of gingiva, oral mucosal membranes, pharynx, tongue and all other oral soft tissue; and

(b) Oral conditions that may affect successful denture construction and use.

(4) Record Retention. Patient documentation, written or archived electronically by computer, must be retained for a minimum of seven years and available upon request by the agency.

(5) Minimum Standards of Acceptable Patient Care. Licensees must adhere to the following practice standards in rendering acceptable patient care:

(a) Maintain accurate patient records;

(b) Provide goods and services within a reasonable amount of time;

(c) Seek consultation/referral if indicated;

(d) Make accurate representation to the patient on services or denture functionality;

(e) Provide or arrange for continuity of care or emergency treatment for a patient currently receiving treatment;

(f) Employ current denture technology practices and materials;

(g) Adhere to appropriate use of quality materials;

(h) Adhere to Centers for Disease Control infection control standards and the Board's clinical requirements;

(i) Provide a copy of the patient record in a reasonable amount of time for a reasonable amount of money as requested by the patient.

(6) Minimum Standards of Acceptability for Full Dentures: Licensees must adhere to the following practice standards in constructing full dentures that provide appropriate function. Acceptability is measured against the following criteria:

(a) The maxillary denture covers the entire hard palate, with a postdam that extends from the hamular notch to form a posterior seal on the soft palate;

(b) The mandibular denture has full posterior flanges, extending near the floor of the mouth and extending distally to include a portion of the retromolar pad;

(c) The denture base material adapts to the soft tissues and the extension achieves stability;

(d) Tooth position, size, and shade appear natural;

(e) Contour and shade of the denture base material appear natural;

(f) Centric relation, if not correct, is correctable;

(g) Vertical dimension is within the physiologic tolerance of the patient;

(h) No occlusal interferences are present in lateral and protrusive excursions;

(i) Occlusal surfaces have anatomic or nonanatomic detail, and masticatory forces are evenly distributed;

(j) Occlusal disharmony is not present; and

(k) There may not be movement of the denture when biting pressure is applied in anterior and posterior segments of the arch except when it is not reasonably possible to achieve the desired result.

(7) Any deviation from the standards outlined in subsection (6)(a) through (k) of this rule, must be based on the patient's individual physiology, in the best interest of the patient, and in conformance with generally accepted standards of patient care. On such occasion, the dentist must document the reasons for the deviation in the patient record. Failure to document the reasons for deviation from stated standards creates a presumption that the deviation was not in the best interest of the patient.

(8) Violation of Standards. Violation of any practice standard in OAR 331-420-0000 shall constitute grounds for discipline.

Stat. Auth.: ORS 676.605, 676.615, 680.550 & 680.565

Stats. Implemented: ORS 676.605, 676.615, 680.550 & 680.565

Hist.: HD 4-1988, f. & cert. ef. 3-4-88; HD 4-1989, f. & cert. ef. 6-1-89; HD 13-1991(Temp), f. & cert. ef. 9-30-91; HD 3-1992, f. & cert. ef. 3-25-92, Subsections (9)(a) through (h) renumbered to 333-020-0090 and 333-020-0100; HD 22-1993, f. 12-30-93, cert. ef. 1-1-94; HDLP 3-1998, f. 6-26-98, cert. ef. 7-1-98, Renumbered from 333-020-0085; HLO 1-2003, f. 1-21-03, cert. ef. 2-1-03; HLO 2-2004, f. 6-29-04, cert. ef. 7-1-04

331-420-0010

Business Premise Requirements

The clinical procedures of denture technology shall be conducted in business premises that meet the following criteria:

(1) All areas of the business premises where denture technology is practiced shall be kept clean and in good repair.

(2) Denturists shall be subject to all Oregon Department of Human Services, Health Services and other city, county, state and federal regulations pertaining to public health and safety. Compliance with building, state fire, plumbing and electrical regulations is required.

(3) When an employee/employer relationship exists, denturists shall comply with ORS 654 and the Oregon Safe Employment Act, and adhere to all Oregon Occupational Safety and Health Codes (OR-OSHA), and Centers for Disease Control (CDC) infection control standards.

(4) Pets or other animals shall not be permitted in the business premises. This prohibition does not apply to registered therapy animals, trained guide animals for the disabled, sightless or hearing impaired, or fish in an aquarium.

[Publications: Publications referenced are available from the agency.]

Stat. Auth.: ORS 680.550 & 680.565

Stats. Implemented: ORS 680.550 & 680.565

Hist.: HD 13-1991(Temp), f. & cert. ef. 9-30-91; HD 3-1992, f. & cert. ef. 3-25-92, Renumbered from 333-020-0085(9)(a) through (h); HD 22-1993, f. 12-30-93, cert. ef. 1-1-94; HDLP 3-1998, f. 6-26-98, cert. ef. 7-1-98, Renumbered from 333-020-0090; HLO 1-2003, f. 1-21-03 cert. ef. 2-1-03

331-420-0020

Clinical Requirements

The Board will consider current Centers for Disease Control guidelines when determining acceptable patient care and requirements for the clinical practice of denture technology. Additionally, denturists must comply with the following standards:

(1) Instruments, implements, supplies and impression trays used in intra-oral procedures that come in contact with body fluids shall be sterilized prior to each use.

(2) Instruments or other equipment which are "heat-sensitive" shall be disinfected by complete immersion of the object(s) or portion(s) thereof to be disinfected, in an FDA approved chemical sterilant, and used according to the manufacturer's instructions.

(3) Mechanical sterilizing devices shall be tested for functionality on a quarterly basis by means of a biological monitoring system that indicates the destruction of micro-organisms, and chemical indicators (color change) to assure sufficient temperature and correct functioning of equipment during each sterilization cycle.

(4) Chemical and biological test results shall be available at the business premises at all times for inspection by the Health Licensing Office enforcement officers. Biological test results must be on laboratory letterhead and must contain the test date, and the name, model and serial number of the unit tested. Biological test results shall be retained for a two year period.

(5) Environmental surfaces that are contaminated by blood or saliva shall be disinfected with a high-level disinfectant, which is tuberculocidal and labeled accordingly, or bleach solution, used according to manufacturer's instructions.

(6) Disposable gloves shall be worn whenever placing fingers into the mouth of a patient or when handling blood or saliva contaminated instruments or equipment. Hands shall be washed and re-gloved before performing procedures on another patient.

(7) All contaminated wastes and sharps shall be disposed of according to governmental requirements, specifically ORS 459.386 through 459.405 and OAR 333-056-0020. "Sharps" means any object that can penetrate the skin, including but not limited to needles, scalpel blades, lancets, glass tubes, or other instruments that could be broken during handling, and syringes that have been removed from their original sterile containers.

(8) All procedures performed shall be in such a manner as to avoid cross contamination of blood borne pathogens.

Stat. Auth.: ORS 676.605, 676.615, 680.550 & 680.565

Stats. Implemented: ORS 676.605, 676.615, 680.550 & 680.565

Hist.: HD 3-1992, f. & cert. ef. 3-25-92, Renumbered from 333-020-0085(9)(a) through (h); HD 22-1993, f. 12-30-93, cert. ef. 1-1-94; HDLP 3-1998, f. 6-26-98, cert. ef. 7-1-98, Renumbered from 333-020-0100; HDLP 1-2001, f. 3-21-01, cert. ef. 4-1-01; HLO 1-2003, f. 1-21-03, cert. ef. 2-1-03; HLO 2-2004, f. 6-29-04, cert. ef. 7-1-04

DIVISION 425

COMPLAINT PROCESSING AND RESOLUTION

331-425-0010

Procedure for Filing a Complaint

The Health Licensing Office may initiate and conduct investigations of matters relating to the practice of denture technology, pursuant to ORS 676.608, and may take appropriate disciplinary action in accordance with the provisions of ORS 676.612 and 680.535.

Stat. Auth.: ORS 676.608, 676.615, 676.992, 680.535 & 680.565

Stats. Implemented: ORS 676.608, 676.615, 676.992, 680.535 & 680.565

Hist.: HD 1-1983, f. & ef. 1-20-83; HD 4-1989, f. & cert. ef. 6-1-89; HD 3-1992, f. & cert. ef. 3-25-92; HD 22-1993, f. 12-30-93, cert. ef. 1-1-94; HDLP 3-1998, f. 6-26-98, cert. ef. 7-1-98, Renumbered from 333-020-0070; HDLP 1-2001, f. 3-21-01, cert. ef. 4-1-01; HLO 2-2004, f. 6-29-04, cert. ef. 7-1-04

DIVISION 430

DISCIPLINE; CIVIL PENALTIES

331-430-0000

Disciplinary Action

(1) The Health Licensing Office may refuse to issue, suspend or revoke a license, or place a licensed person on probation for the causes stated in ORS 680.535.

(2) The agency shall have grounds for a determination of incompetency in the practice of denture technology pursuant to ORS 680.535, upon evidence of the use of any controlled substance, dangerous or illegal drug, intoxicating liquor, or any emotional or physical impairment of a dentist, to the extent that such use or condition impairs or prevents the denturists ability to perform competently.

(3) The agency shall have grounds for a determination of fraud or misrepresentation in the practice of denture technology pursuant to ORS 680.535, upon evidence of any advertising statements of a nature that would deceive or mislead the public or that are untruthful, such as:

(a) Incorrect use of a title; or

(b) Claiming or implying a qualification, competency or specialty in connection with the practice of denture technology to which the person is not entitled, or which is untrue.

(4) The specific identification of grounds for disciplinary action stated in sections (2) and (3) of this rule are intended to be descriptive of some, but not limited to, those causes for which disciplinary action may be taken as stated in ORS 680.535.

(5) Failure to cooperate with the agency or its agent is considered unprofessional conduct and is subject to discipline, which may include license suspension, revocation and/or assessment of civil fines. Unprofessional conduct includes, but is not limited to, the following:

(a) Failing to respond to an inquiry from the agency regarding a complaint;

(b) Failing to provide information to the agency in response to a written inquiry, or provide written response within specified time allotted by notice of intended action;

(c) Failing to temporarily surrender custody of original client records to the agency upon request, which includes treatment charts, models, health histories, billing documents, correspondence and memoranda;

(d) Interference, use of threats or harassment which delays or obstructs any person in providing evidence in any investigation, contested case, or other legal action instituted by the agency;

(e) Interference, use of threats or harassment which obstructs or delays the agency in carrying out its functions under ORS 680.500 to 680.535 and rules adopted thereunder;

(f) Deceiving or attempting to deceive the Board or agency concerning any matter under investigation including altering or destroying any records.

(6) When the Health Licensing Office requires correction of deficiencies in lieu of the suspension, revocation or denial of license, the correction shall be made within the time frames established by the agency or the suspension, revocation or denial of license action will proceed.

(7) Practicing denture technology while a license is in suspended status is grounds for additional disciplinary action, which includes revocation and/or fines.

Stat. Auth.: ORS 680.530 & 680.565

Stats. Implemented: ORS 680.535 & 680.565

Hist.: HD 1-1983, f. & cf. 1-20-83; HD 4-1989, f. & cert. ef. 6-1-89; HD 13-1991(Temp), f. & cert. ef. 9-30-91; HD 3-1992, f. & cert. ef. 3-25-92; HD 22-1993, f. 12-30-93, cert. ef. 1-1-94; HDLP 3-1998, f. 6-26-98, cert. ef. 7-1-98, Renumbered from 333-020-0075; HDLP 1-2001, f. 3-21-01, cert. ef. 4-1-01

331-430-0030

Establishing Civil Penalty Amounts

The Health Licensing Office has adopted the following presumptive penalty schedule for the first and second violations of the following laws and rules. The following scheduled shall apply except as the agency otherwise determines in consideration of the factors referenced in OAR 331-020-0060. For subsequent violations the provisions of OAR 331-020-0060 will apply.

(1) Practicing or holding one's self out as available to practice denture technology, or using the title denturist without a license or with an expired or suspended license is a violation of ORS 680.505 and may incur a penalty of \$5,000.

(2) Licensed denturists who allow non-licensed persons to perform clinical procedures is a violation of ORS 680.505 and may incur a penalty of \$5,000.

(3) Failing to post a current, valid denturist license in public view is a violation of OAR 331-410-0090 and may incur a penalty of \$150.

(4) Performing or offering to perform denture technology services involving intra-oral work, without obtaining a valid Oral Health Certificate prior to services being rendered, or without having qualified for and obtained an oral pathology endorsement is a violation of ORS 680.545, and may incur a penalty of \$2,000.

(5) Failing to notify the agency within 30 days of a change in business related information or license status, is a violation of OAR 331-010-0040, and may incur a penalty of \$200.

(6) Advertising in a manner, which would deceive or mislead the public or that is untruthful is a violation of ORS 676.612(1)(b), and may incur a penalty of \$2,000.

(7) Failing to meet practice standards, involving health history, clinical examination, record of clinical treatment, or retention of records is a violation of ORS 680.550 and OAR 331-420-0000, and may incur a penalty of \$1,000.

(8) Failing to meet minimum standards of acceptability for full dentures according to OAR 331-420-0000(6), or to meet standards for partial dentures as determined by the board may incur a penalty of \$5,000.

(9) Failing to maintain clean floors, walls and ceilings in the clinical area of the premises is a violation of OAR 331-420-0010(1), and may incur a penalty of \$1,000.

(10) Failing to disinfect surfaces or blood spills by using an Environmental Protection Agency registered disinfectant is a violation of OAR 331-420-0020(5), and may incur a penalty of \$1,000.

(11) Failing to sterilize all instruments, impression trays, and supplies for intraoral use prior to each use on patients is a violation of OAR 331-420-0020(1), and may incur a penalty of \$1,000.

(12) Failing to test all sterilizing devices on a quarterly basis is a violation of OAR 331-420-0020(3), and may incur a penalty of \$1,000.

(13) Failing to have both biological and chemical test results available at the facility for inspection by the agency enforcement officers is a violation of OAR 331-420-0020(4), and may incur a penalty of \$1,000.

(14) Failing to keep Environmental Protection Agency registered disinfecting solution at adequate strength and free of foreign material to maintain effectiveness is a violation of OAR 331-420-0020(5), and may incur a penalty of \$1,000.

(15) Failing to wash hands with a germicidal or antiseptic soap and water before and after every patient when clinical contact occurs or failing to use disposable gloves whenever placing fingers into a patient's mouth or when handling blood or saliva contaminated instruments or equipment is a violation of OAR 331-420-0020(6), and may incur a penalty of \$1,000.

(16) Failing to perform procedures in such a manner as to avoid cross contamination of blood borne pathogens is a violation of OAR 331-420-0020(8), and may incur a penalty of \$500.

(17) Failing to dispose contaminated wastes and/or sharps in accordance with provisions of ORS 459.386 through 459.405 and OAR 333-056-0020 is a violation of 331-420-0020(7) and may incur a penalty of \$1,000.

(18) Allowing pets or other animals on the premises of the business facility other than trained guide animals or fish in an aquarium, is a violation of OAR 331-420-0010(4), and may incur a penalty of \$500.

Stat. Auth.: ORS 680.565 & 680.572

Stats. Implemented: ORS 680.565 & 680.572

Hist.: HD 3-1992, f. & cert. ef. 3-25-92; HD 22-1993, f. 12-30-93, cert. ef. 1-1-94; HDLP 3-1998, f. 6-26-98, cert. ef. 7-1-98, Renumbered from 333-020-0120; HDLP 1-2001, f. 3-21-01, cert. ef. 4-1-01; HLO 2-2004, f. 6-29-04, cert. ef. 7-1-04

DIVISION 601

GENERAL ADMINISTRATION

331-601-0010

Fees

(1) Applicants and licensees are subject to the provisions of OAR 331-010-0010 and 331-010-0020 regarding the payment of fees, penalties and charges.

(2) Fees established by the Oregon Health Licensing Agency are as follows:

(a) Application:

(A) License: \$125.

(B) Temporary license: \$150.

(C) Trainee registration: \$100.

(b) Examination:

(A) Oregon laws & rules: \$50.

(B) Written: \$150.

(C) Practical: \$175.

(D) Audiologist: \$50.

(c) Original issuance of license:

(A) License: \$125 for one year.

(B) Temporary license: \$100.

(d) Renewal of license: \$125 for one year.

(e) Delinquent (late) renewal of license: \$25 for the first month in expired status, and \$10 each month thereafter while in an expired status.

(f) Replacement of license, including name change: \$25.

(g) Duplicate license document: \$25 per copy with maximum of three.

(h) Affidavit of licensure: \$50.

(i) An additional \$25 administrative processing fee will be assessed if a NSF or non-negotiable instrument is received for payment of fees, penalties and charges. Refer to OAR 331-010-0010.

Stat. Auth.: ORS 676.605, 676.615, 694.155 & 694.185

Stats. Implemented: ORS 676.605, 676.615, 694.155 & 694.185

Hist.: HD 24-1985(Temp), f. & cf. 10-17-85; HD 33-1985, f. & cf. 12-13-85; HD 8-1990, f. 4-4-90, cert. ef. 4-5-90; HD 14-1990, f. 6-1-90, cert. ef. 7-1-90; HD 17-

1990(Temp), f. 6-15-90, cert. ef. 7-1-90; HD 21-1990(Temp), f. & cert. ef. 7-3-90; HD 22-1990, f. & cert. ef. 8-15-90; HD 14-1991(Temp), f. 9-30-91, cert. ef. 10-1-91; HD 21-1991, f. & cert. ef. 12-31-91; HD 18-1997, f. 12-12-97, cert. ef. 12-15-97; OHD 9-1999, f. & cert. ef. 11-15-99; OHD 10-2000, f. & cert. ef. 11-15-00; Renumbered from 333-025-0005, HLO 6-2004, f. 6-29-04, cert. ef. 7-1-04; HLA 6-2008, f. 9-15-08, cert. ef. 10-1-08; HLA 6-2011(Temp), f. & cert. ef. 8-1-11 thru 1-28-12; HLA 12-2011, f. 10-14-11, cert. ef. 10-15-11

DIVISION 620

GENERAL ADMINISTRATION

331-620-0005

Definitions

- (1) "Agency" means the Oregon Health Licensing Agency.
- (2) "Assistive listening device" Assistive listening devices which are exempt from the provisions of ORS Chapter 694 are defined as products designed to solve one or more specific listening problems created by a hearing loss, and include personal or group listening devices, telephone listening devices, or alert/alarm systems. The primary difference between listening devices and hearing aids is that an assistive listening device is designed to assist in only one, or a few, listening environments, and is for temporary use only. A hearing aid is designed for use in a wide range of listening environments and is primarily for full time use. The following criteria shall be considered in categorizing an assistive listening device:
 - (a) Personal Assistive Listening Device:
 - (A) Is used for the assistance of only one person;
 - (B) May be used either hardwired or wireless type;
 - (C) May be adaptable to particular environments;
 - (D) May not be fitted to an individual hearing loss;
 - (E) May not be sold as a standard hearing aid;
 - (F) May be an external option that will work with a hearing aid either through the telecoil or by direct audio input coupler built into a hearing aid.
 - (b) Group Assistive Listening Device:
 - (A) Includes infrared and FM systems and induction loop systems;
 - (B) Includes auditory trainers that are classified as such by the FDA exemption for group auditory trainers (21 CFR 801.421(e));
 - (C) May include telecaption decoders.
 - (c) Telephone Devices for the Hearing Impaired:
 - (A) Amplified handsets;
 - (B) In-line amplifiers for modular telephones;
 - (C) Receiver add-ons;
 - (D) An external option that will work with a hearing aid.
 - (d) Telecommunications Devices for the Deaf (TDD):
 - (A) Typically visually based;
 - (B) TDD and Teletypewriter for the deaf (TTY) systems.
 - (e) Alert/Alarm Systems:
 - (A) Systems that use a form of visual or vibratory stimuli to alert an individual;
 - (B) May be hardwired or use an acoustic pickup.
- (3) "Audiologist" means a person licensed under ORS 681 and who practices audiology as defined by that statute.
- (4) "CEU" means a continuing education unit and the numerical value determined by the board to be earned by a renewal applicant by attending a specified training course. The terms "continuing education credit" and "continuing education unit" are synonymous and may be used interchangeably.
- (5) "Consummation of sale" means when the purchaser takes delivery or possession of the hearing aid after agreeing to purchase the hearing aid.
- (6) "Continuing Education" means post-licensure education related specifically to hearing or hearing aid technology undertaken to maintain professional competency to practice as a hearing aid specialist, in the interest of safety, health and welfare of the people served.
- (7) "Demonstration instrument" means a hearing aid that has been worn by a prospective user as part of a bona fide hearing aid evaluation conducted in the presence of the hearing aid specialist.
- (8) "Delivery" means, as used in ORS 694.042, acceptance and possession of the hearing aids by the consumer, which starts the 30 calendar day rescission right period. Hearing aids that have been out of the consumer's possession for a period of 72 hours or more for any alternation or adjustment during the 30 calendar day rescission right

period may restarts the 30 calendar day rescission right period if both parties agree to the extension in writing. Delivery includes:

- (a) The initial fitting and delivery of the hearing aid(s), which must be performed in person by a licensed hearing aid specialist, audiologist or physician pursuant to ORS 694.025(2) including the acceptance and possession of the hearing aid(s); and
- (b) The return of a hearing aid by the consumer to the specialist, which may be hand carried or mailed by certified mail to the official place of business of the hearing aid specialist.
- (9) "Direct supervision" means a registered supervisor is present in the facility for the purpose of supervising and is in view the procedures performed by a registered trainee, pursuant to OAR 331-630-0030.
- (10) "Facility" means physical place of business where services defined in ORS 694.015(4) are conducted, including but not limited to all areas used by hearing aid specialist and client, i.e. testing location, waiting/reception area.
- (11) "Hearing aid" as defined in ORS 694.015(3) does not include assistive listening devices as defined in OAR 331-620-0005 (2).
- (12) "Hearing aid specialist" means a person licensed pursuant to ORS 694.015 through 694.185.
- (13) "Purchase price" means:
 - (a) The total amount paid or agreed to be paid by or on behalf of the consumer for the cost of the hearing aid(s); and
 - (b) Professional fees charged for the actual fitting and sale of the hearing aid(s) including:
 - (A) The evaluation or measurement of the powers or range of human hearing as they relate to hearing aid fitting;
 - (B) Hearing aid evaluation;
 - (C) Hearing aid consultation;
 - (D) Hearing aid recommendation;
 - (E) Hearing aid selection;
 - (F) Hearing aid fitting and dispensing;
 - (G) Adaptation of a hearing aid, if related to the original purchase;
 - (H) Counseling, if related to the original purchase and done by the person dealing in hearing aids and/or company, firm or facility involved in dispensing of the original hearing aid, and any other fees for service which are charged in regards to a hearing aid being fitted as a therapeutic device; and
 - (I) Ear impression and ear molds.
 - (c) Professional fees charged for diagnostic testing for medical use when done by a physician or on a physician's order shall be excluded from this definition of purchase price.
- (14) "Temporary licensee supervisor" means a person who has met the requirements of OAR 331-630-0015 and who supervises a temporary licensee who is working under the supervisor's indirect supervision.
- (15) "Trainee" means a person who has met the requirements of ORS 694.065, has registered with the agency and is working under the direct supervision of a licensed hearing aid specialist to obtain the training and experience required for hearing aid specialist licensure.
- (16) "Trainee supervisor" means a person who has met the requirements of OAR 331-630-0035 and who directly supervises a trainee working under the supervisor to obtain the training and experience required for hearing aid specialist licensure.

[Publications referenced are available from the agency.]
 Stat. Auth.: ORS 376.615, 694.115, 694.170, 694.185
 Stats. Implemented: ORS 694.025, 694.125, 694.185
 Hist.: HLA 13-2012, f. 8-16-12, cert. ef. 8-17-12

DIVISION 630

LICENSURE OF HEARING AID SPECIALISTS

331-630-0001

Application Requirements

An individual applying for a license must:

- (1) Meet the requirements of OAR 331 division 30.
- (2) Submit a completed application form prescribed by the agency, which must contain the information listed in OAR 331-030-0001 and be accompanied by payment of the required application fees.

(3) In addition to requirements listed in subsections (1) and (2) of this rule, an applicant must provide documentation of one of the following pathways:

(a) Licensure Pathway 1 — Qualification through Trainee registration and examination. An applicant must submit:

(A) A copy of the applicant's high school diploma or General Educational Development (GED) certificate;

(B) Evidence that the applicant is 18 years old or older;

(C) Examination fees pursuant to OAR 331-640-0005;

(D) Evidence that the applicant, pursuant to OAR 331-630-0005, has qualified to take and has obtained a passing score on the Advisory Council on Hearing Aids (Council) Examination, the Council's Oregon Laws Examination and the Council's Oregon Practical Examination;

(E) Upon passage of all required examinations and before issuance of a license, applicant must pay all license fees.

(b) Licensure Pathway 2 — Qualification through equivalency — American Speech-Language-Hearing Association Certification. Applicant must submit:

(A) A copy of the applicant's high school diploma or General Educational Development (GED) certificate;

(B) Evidence that the applicant is 18 years old or older;

(C) Official documentation of certification by the American Speech-Language-Hearing Association or evidence that the applicant has met the requirements of ORS 694.085;

(D) A passing score on the Council's Oregon Laws Examination;

(E) Upon passage of all required examinations and before issuance of a license, applicant must pay all license fees.

(c) Licensure Pathway 3 — Qualification through equivalency — Degree equivalent to requirements for certification by National Board for Certification in Hearing Instrument Sciences. Applicant must submit:

(A) A copy of the applicant's high school diploma or General Educational Development (GED) certificate;

(B) Evidence that the applicant is 18 years old or older;

(C) Official transcript from a regionally accredited college or university demonstrating attainment of a degree sufficient to obtain certification by National Board for Certification in Hearing Instrument Sciences;

(D) A passing score on the Council's Oregon Laws Examination;

(E) Upon passage of all required examinations and before issuance of license, applicant must pay all license fees.

(d) Licensure Pathway 4 — Qualification through equivalency — other state certification. Applicant must submit:

(A) A copy of the applicant's high school diploma or General Educational Development (GED) certificate;

(B) Evidence that the applicant is 18 years old or older;

(C) Official documentation of certification (Affidavit of Licensure) by another state regulatory authority showing that the license was issued by another state or territory of the United States and the licensing requirements are at least equivalent to those in ORS 694.065 and 694.085;

(D) A passing score on the Council's Oregon Laws Examination;

(E) Upon passage of all required examinations and before issuance of license, applicant must pay all license fees.

Stat. Auth.: ORS 376.615, 694.115, 694.170, 694.185

Stats. Implemented: ORS 694.025, 694.125, 694.185

Hist.: HLA 13-2012, f. 8-16-12, cert. ef. 8-17-12

331-630-0005

Advisory Council on Hearing Aids Licensure Examination Requirements

Before an individual seeking Council licensure can take the qualifying examination that individual must either:

(1) Meet training and experience requirements pursuant to OAR 331-630-0040;

(2) Meet training requirements for licensure as an audiologist;

(3) Meet training requirements for certification of a licensed physician by the American Board of Otolaryngology; or

(4) Meet the requirements for certification by the National Board for Certification in Hearing Instrument Sciences.

Stat. Auth.: ORS 376.615, 694.115, 694.170, 694.185

Stats. Implemented: ORS 694.025, 694.125, 694.185

Hist.: HLA 13-2012, f. 8-16-12, cert. ef. 8-17-12

331-630-0011

Temporary Licenses — Application and Issuance

(1) A temporary license may be issued to an applicant who meets the application requirements of ORS 694.065(2) and OAR 331-630-0001(1), (2) and (3)(a)(A), (B) and (C) following agency receipt of a completed application and evidence of training and the required fee(s).

(2) The temporary license will be issued for a one-year period, expiring on the last day of the month one year from the date of issuance.

(3) A temporary license holder must work under the indirect supervision of a supervisor as defined in OAR 331-620-0005(14). Indirect supervision means that the supervisor is not required to be on the premises with the person holding a temporary license under this rule while the temporary license holder performs procedures.

(4) Attainment of permanent licensure status by satisfactorily passing the examination supersedes the temporary hearing aid specialist license.

(5) A temporary license holder may change their designated supervisor if a new Declaration of Responsibility form is signed by the new supervisor and submitted with the application fee to the agency within five days of separation from the former designated supervisor.

Stat. Auth.: ORS 376.615, 694.115, 694.170, 694.185

Stats. Implemented: ORS 694.025, 694.125, 694.185

Hist.: HLA 13-2012, f. 8-16-12, cert. ef. 8-17-12

331-630-0015

Application for Registration as a Temporary Licensee Supervisor

An individual applying for Temporary Licensee Supervisor registration must:

(1) Meet the requirements of OAR 331 division 30;

(2) Submit a completed application form prescribed by the agency, which must contain the information listed in OAR 331-030-0000 and be accompanied by payment of the required application fees.

(3) In addition to requirements listed in subsection (1) and (2) of this rule, a Temporary Licensee Supervisor must:

(a) Hold a current Oregon hearing aid specialist license with no current or pending disciplinary action, and with no fines, fees, or civil penalties owing to the Agency; and

(b) Have been licensed for at least three years.

Stat. Auth.: ORS 376.615, 694.115, 694.170, 694.185

Stats. Implemented: ORS 694.025, 694.125, 694.185

Hist.: HLA 13-2012, f. 8-16-12, cert. ef. 8-17-12

331-630-0020

Supervision of Temporary Hearing Aid Specialists

(1) An individual acting as a designated supervisor for a temporary licensee must sign and file with the agency a Declaration of Responsibility form prescribed by the agency, before supervising any temporary hearing aid specialist. The form must indicate the name of the supervising hearing aid specialist, place of business, telephone number, current license number, and the name, address, and license number of the temporary hearing aid specialist.

(2) The testing, fitting, or selling of a hearing aid by a temporary hearing aid specialist shall be performed under the authority, control, and indirect supervision of the licensed hearing aid specialist designated as the supervisor.

(3) The designated supervisor must review and approve the temporary hearing aid specialist's work before ordering the recommended hearing aid(s).

(4) A designated supervisor shall exercise management, guidance, and control over the activities of the temporary hearing aid specialist; and shall exercise professional judgment and be responsible for all matters relative to the fitting and selling of a hearing aid.

(5) Approval of a temporary hearing aid specialist's work must be documented by the handwritten signature of the designated supervisor, license number, and date of review placed adjacent to the temporary hearing aid specialist's signature on any audiogram, order form, and office copy of a statement to a prospective hearing aid purchaser as required in ORS 694.036 and 694.042.

Stat. Auth.: ORS 376.615, 694.115, 694.170, 694.185

Stats. Implemented: ORS 694.025, 694.125, 694.185

Hist.: HLA 13-2012, f. 8-16-12, cert. ef. 8-17-12

331-630-0025

Application for Registration as a Trainee

An individual applying for Trainee registration must:

- (1) Meet the requirements of OAR 331 division 30;
 - (2) Submit a completed application form prescribed by the agency, which must contain the information listed in OAR 331-030-0000 and be accompanied by payment of the required application fees.
- Stat. Auth.: ORS 376.615, 694.115, 694.170, 694.185
 Stats. Implemented: ORS 694.025, 694.125, 694.185
 Hist.: HLA 13-2012, f. 8-16-12, cert. ef. 8-17-12

331-630-0030

Trainee Registration

- (1) A trainee, registered under ORS 694.065(1) may deal in hearing aids under the direct supervision of a designated supervisor except that a trainee may not fit or sell hearing aids.
 - (2) The agency will authorize an Oregon licensed hearing aid specialist to act as designated supervisor of a trainee provided the licensee holds a valid license, has been actively practicing for at least three years, and has not had any disciplinary action or civil penalty imposed by the agency.
 - (3) A licensed hearing aid specialist must not supervise more than four trainees at any one time.
 - (4) A designated supervisor will not provide training as outlined in OAR 331-630-0040 until a trainee registration agreement and Declaration of Responsibility has been submitted to the agency.
 - (5) A designated supervisor must notify the agency in writing within five calendar days if the trainee is no longer being supervised and trained, and must provide a Certification of Training form to the agency showing the number of hours of training completed.
 - (6) A designated supervisor's authorization may be withdrawn for providing incomplete or inadequate training, falsifying documentation, or allowing the trainee to fit or sell hearing aids.
- Stat. Auth.: ORS 376.615, 694.115, 694.170, 694.185
 Stats. Implemented: ORS 694.025, 694.125, 694.185
 Hist.: HLA 13-2012, f. 8-16-12, cert. ef. 8-17-12

331-630-0035

Application for Registration as a Trainee Supervisor

- An individual applying for a Trainee Supervisor registration must:
- (1) Meet the requirements of OAR 331 division 30;
 - (2) Submit a completed application form prescribed by the agency, which must contain the information listed in OAR 331-030-0000 and be accompanied by payment of the required application fees.
 - (3) In addition to requirements listed in subsection (1) and (2) of this rule, a Trainee Supervisor must:
 - (a) Hold a current Oregon hearing aid specialist license with no current or pending disciplinary action, and with no fines, fees, or civil penalties owing to the Agency;
 - (b) Demonstrate completion of the IHS Distance Learning Program for Professionals in Hearing Health Sciences, or demonstrate three or more years National Board Certification; and
 - (c) Have been a licensed hearing aid specialist for at least four years.
- Stat. Auth.: ORS 376.615, 694.115, 694.170, 694.185
 Stats. Implemented: ORS 694.025, 694.125, 694.185
 Hist.: HLA 13-2012, f. 8-16-12, cert. ef. 8-17-12

331-630-0040

Trainee Program

- (1) The Trainee program consists of both practical and theory training.
- (2) Practical training consists of 520 hours of training under the direct supervision of a Trainee Supervisor registered pursuant to OAR 331-630-0035 and must include:
 - (a) 60 hours in audiometric testing;
 - (b) 60 hours in counseling regarding hearing examination;
 - (c) 60 hours in hearing aid selection;
 - (d) 60 hours in ear-mold impressions;
 - (e) 180 hours in hearing aid fitting and follow-up care;
 - (f) 60 hours in business practices, including ethics and regulations and sanitation and infection control; and
 - (g) 40 hours in electives in any of the categories listed in subsections a. through e. above.
- (3) Theory training consists of successful completion of the International Hearing Society's Distance Learning Program for Professionals in Hearing Health Sciences.

- (4) Training program materials can be reviewed at www.oregon.gov/OHLA/
 - (5) Trainees who register and are approved to commence their training program before the effective date of this rule may complete their training under the provisions of the rule that was in place at that time. The trainee must complete the training program within 180 days following the effective date of this rule. A trainee failing to complete the program within 180 days must reapply and, if accepted, must begin the program pursuant to provisions of this rule.
- Stat. Auth.: ORS 376.615, 694.115, 694.170, 694.185
 Stats. Implemented: ORS 694.025, 694.125, 694.185
 Hist.: HLA 13-2012, f. 8-16-12, cert. ef. 8-17-12

331-630-0050

General Examination Information

- (1) The board approved examinations for a license include a written examination containing both a national section and a state-specific section, and a practical examination.
 - (2) To take the examinations, an applicant must meet identification requirements listed under OAR 331-030-0000.
 - (3) The examination is administered in English only, unless an agency approved testing contractor or vendor provides the examination in languages other than English.
 - (4) Examination candidates may be electronically monitored during the course of testing.
 - (5) The Board will establish a maximum time allowance for each section of the examination.
 - (6) Notes, textbooks, notebooks, electronic equipment or communication devices, such as personal computers, pagers and cellular telephones or any other devices deemed inappropriate by the agency, are prohibited in the examination area.
 - (7) A candidate may be immediately disqualified before, during, or after the examination for conduct that interferes with the examination or otherwise violates this rule. At the time of disqualification, the examination may be invalidated and examination fees may be forfeited. Disqualifying conduct includes but is not limited to:
 - (a) Directly or indirectly giving, receiving, soliciting, and attempting to give, receive or solicit aid during the examination process;
 - (b) Violations of subsection (6) of this rule;
 - (c) Removing or attempting to remove any examination-related information, notes or materials from the examination site;
 - (d) Failing to follow directions relative to the conduct of the examination; and
 - (e) Exhibiting behavior that impedes the normal progress of the examination.
 - (8) The applicant may be required to reapply, submit additional examination fees, and request in writing to schedule another examination if applicant is disqualified from taking the examination.
- Stat. Auth.: ORS 376.615, 694.115, 694.170, 694.185
 Stats. Implemented: ORS 694.025, 694.125, 694.185
 Hist.: HLA 13-2012, f. 8-16-12, cert. ef. 8-17-12

331-630-0060

Examination Retake

- (1) All examination retakes are subject to examination fees and an approved examination schedule set by the agency
 - (2) If after four attempts, an applicant has not passed the state administered practical examination, the applicant must request permission from the Council to retake the examination again. If the applicant does not pass the examination upon the fifth attempt, the applicant may be required to retake training required under this division.
- Stat. Auth.: ORS 376.615, 694.115, 694.170, 694.185
 Stats. Implemented: ORS 694.025, 694.125, 694.185
 Hist.: HLA 13-2012, f. 8-16-12, cert. ef. 8-17-12

331-630-0070

License Issuance and Renewal

- (1) AUTHORIZATION AND RENEWAL: A licensee is subject to the provisions of OAR Chapter 331, division 30 regarding the issuance and renewal of a license, provisions regarding authorization to practice, identification requirements, and requirements for issuance of a duplicate license.
- (2) AUTHORIZATION RENEWAL: To avoid delinquency penalties, license renewal must be made prior to the license entering inactive status. The licensee must submit the following:

- (a) Renewal application form;
- (b) Payment of required renewal fee pursuant to 331-640-0005; and
- (c) Documentation of having obtained required annual continuing education under OAR 331-650-0005, on a form prescribed by the agency.
- (3) **INACTIVE AUTHORIZATION:** A license may be inactive for up to three years. When renewing after entering inactive status, the licensee must submit the following:
 - (a) Renewal application form;
 - (b) Payment of delinquency and renewal fees pursuant to OAR 331-640-0005;
 - (c) Documentation of having obtained required annual continuing education under OAR 331-650-0005, on a form prescribed by the agency, whether license has been current or inactive;
- (4) **EXPIRED AUTHORIZATION:** A license that has been inactive for more than three years is expired and the licensee must reapply and meet the requirements listed in OAR 331-630-0001.
- (5) A licensee failing to meet continuing education requirements listed under OAR 331-650-0005 must reapply and meet requirements pursuant to OAR 331-630-0001.
- (6) A licensee may not practice with an inactive or expired license.

Stat. Auth.: ORS 376.615, 694.115, 694.170, 694.185
 Stats. Implemented: ORS 694.025, 694.125, 694.185
 Hist.: HLA 13-2012, f. 8-16-12, cert. ef. 8-17-12

DIVISION 650

CONTINUING EDUCATION REQUIREMENTS

331-650-0005

Continuing Education Requirements

- (1) To maintain licensure, hearing aid specialists must complete a minimum of 12 hours of approved continuing education each year. Credit hours obtained in excess of those required for the one-year reporting period may not be carried forward. A licensee's continuing education requirements remain in effect during the time a license is inactive.
- (2) Each licensee shall document compliance with the continuing education requirement through attestation on the license renewal application. Licensees are subject to provisions of OAR 331-650-0015 pertaining to periodic audit of continuing education.
- (3) Approved continuing education must be obtained by participation in or attendance at a course provided by an accredited college or university, a course or program approved by the International Hearing Society or an agency pre-approved course or program.
- (4) Continuing education must address subject matter related to dispensing hearing aids in accordance with ORS 694.015 through 694.185.
- (5) CE credit will be awarded based on the following criteria:
 - (a) Completion and passing of academic courses taken from an accredited college or university are awarded 15 hours for each semester-based credit earned, 14 hours for each trimester-based credit earned or 10 hours for each quarter-based credit earned;
 - (b) Completion of professional courses which meet academic course requirements in content, instruction and evaluation will be assigned 15 hours for each semester-based credit earned, 14 hours for each trimester-based credit earned or 10 hours for each quarter-based credit earned; and
 - (c) Courses that do not meet standards as set forth in paragraphs (a) and (b) of this subsection, such as workshops, symposiums, seminars, laboratory exercises, or any applied experience with or without formal classroom work may be assigned credit at the rate of one hour for each hour of attendance.
- (6) No more than three hours may be earned in one year for courses in cardiopulmonary resuscitation;
- (7) Licensees must complete a two hour course in Safety and Infection Control once every two years.
- (8) Documentation supporting compliance with continuing education requirements must be maintained for a period of two years following renewal, and must be available to the agency upon request.

Stat. Auth.: ORS 376.615, 694.115, 694.170, 694.185
 Stats. Implemented: ORS 694.025, 694.125, 694.185
 Hist.: HLA 13-2012, f. 8-16-12, cert. ef. 8-17-12

331-650-0010

Schedule of Civil Penalties for Violations of Laws and Rules

The agency has adopted the following presumptive penalty schedule for the violations of the following laws and rules. The following schedule shall apply except as the agency otherwise determines in consideration of the factors referred to in OAR 331-020-0060. For subsequent offenses, the provisions of 331-020-0060 will apply.

- (1) Dealing in or purporting to deal in hearing aids with an expired license is a violation of ORS 694.025 and OAR 331-030-0010(4) and shall incur the following penalties:
 - (a) For 1st offense: \$200;
 - (b) For 2nd offense: \$500;
 - (c) For 3rd offense: \$1,000 in addition to any other penalties allowed by law including probation, suspension, revocation or refusal to issue a license.
- (2) Dealing in or purporting to deal in hearing aids without a license, with a license issued to another person, or a suspended license is a violation of ORS 694.025 and/or 676.612(1)(d) or 676.612(4) and OAR 331-030-0020(1) and shall incur the following penalties:
 - (a) For 1st offense: \$1,000;
 - (b) For 2nd offense: \$5,000 in addition to any other penalties allowed by law including revocation or refusal to issue a license.
- (3) Failing as a licensee to inform the agency within 30-calendar days of a change of information is a violation of OAR 331-010-0040(1) and shall incur the following penalties:
 - (a) For 1st offense: \$50;
 - (b) For 2nd offense: \$100;
 - (c) For 3rd offense: \$150.
- (4) Dealing in hearing aids by a trainee when not under the direct supervision of a supervisor is a violation of ORS 694.025 and 694.065(2) and OAR 331-610-0020(1) and shall incur the following penalties:
 - (a) For 1st offense: \$150;
 - (b) For 2nd offense: \$300;
 - (c) For 3rd offense: \$500.
- (5) Failing, as a supervisor, to provide direct supervision of a trainee dealing in hearing aids is a violation of ORS 694.065(2), OAR 331-610-0020(1) and (6) and shall incur the following penalties:
 - (a) For 1st offense: \$500;
 - (b) For 2nd offense: \$1,000 and suspension of the authorization to provide supervisory training;
 - (c) For 3rd offense: \$5,000 in addition to any other penalties allowed by law including probation, suspension, revocation or refusal to issue a license.
- (6) Failing, as a supervisor, to exercise management, guidance, and control over the activities of the temporary hearing aid specialist is a violation of ORS 676.612(1)(j) and OAR 331-610-0030(3) shall incur the following penalties:
 - (a) For 1st offense: \$500;
 - (b) For 2nd offense: \$1,000 and suspension of the authorization to provide supervisory training;
 - (c) For 3rd offense: \$5,000 in addition to any other penalties allowed by law including probation, suspension, revocation or refusal to issue a license.
- (7) Failing, as a supervisor, to evaluate and approve all matters involved in the testing, fitting, or in the sale of a hearing aid by a temporary hearing aid specialist before ordering the recommended hearing aid(s) is a violation of ORS 676.612(1)(j) and OAR 331-610-0030(2) and/or (4) and shall incur the following penalties:
 - (a) For 1st offense: \$500;
 - (b) For 2nd offense: \$1,000 and suspension of the authorization to provide supervisory training;
 - (c) For 3rd offense: \$5,000 in addition to any other penalties allowed by law including probation, suspension, revocation or refusal to issue a license.
- (8) Failing, as a supervisor of a temporary hearing aid specialist, to co-sign and approve the audiogram, order form and office copy of statement, or failing to mail or provide a copy of the statement to the prospective hearing aid purchaser as required in ORS 694.036 and 694.042 is a violation of 676.612(1)(j) and OAR 331-610-0030(4) and shall incur the following penalties:
 - (a) For 1st offense: \$300;
 - (b) For 2nd offense: \$1,000 and suspension of the authorization to provide supervisory training;

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(c) For 3rd offense: \$5,000 in addition to any other penalties allowed by law including probation, suspension, revocation or refusal to issue a license.

(9) Failing to meet continuing education requirements pursuant to OAR 331-630-0000(1), or to provide or retain required documentation is a violation of 331-630-0000(11) and/or 331-630-0010(2) and shall incur the following:

(a) For 1st offense: \$500 and suspension or revocation of license;

(b) For 2nd offense: \$1,000 and suspension or revocation of license;

(c) For 3rd offense: \$5,000 in addition to any other penalties allowed by law including revocation or refusal to issue a license.

(10) Failure to correct continuing education deficiencies within prescribed time frames is a violation of OAR 331-630-0010(4) and shall incur the following penalties:

(a) For 1st offense: \$500 and suspension or revocation of license;

(b) For 2nd offense: \$1,000 and suspension or revocation of license;

(c) For 3rd offense: \$5,000 in addition to any other penalties allowed by law including revocation or refusal to issue a license.

(11) Disqualification from an examination as a result of conduct is a violation of OAR 331-610-0050(2) and shall incur the following penalties: \$1,000, disqualification from reexamination as determined by the agency director and revocation of temporary hearing aid specialists license

(12) Failing to keep the facility clean and sanitary is a violation of OAR 331-640-0010(1) and shall incur the following penalties:

(a) For 1st offense: \$100;

(b) For 2nd offense: \$300;

(c) For 3rd offense: \$1,000.

(13) Failing to disinfect devices after direct contact with client's skin is a violation of OAR 331-640-0010(2) and shall incur the following penalties:

(a) For 1st offense: \$100;

(b) For 2nd offense: \$300;

(c) For 3rd offense: \$1,000.

(14) Failing to wash or sanitize hands before taking an ear mold impression is a violation of OAR 331-640-0010(4) and shall incur the following penalties:

(a) For 1st offense: \$100;

(b) For 2nd offense: \$300;

(c) For 3rd offense: \$1,000.

(15) Failing to calibrate or provide proof of calibration on audiometric testing equipment is a violation of OAR 331-640-0020 and shall incur the following penalties:

(a) For 1st offense: \$100;

(b) For 2nd offense: \$300;

(c) For 3rd offense: \$1,000.

(16) Failing to provide a client with a properly formatted Statement to Prospective Purchaser is a violation of ORS 694.036(1) and OAR 331-640-0030(1) and shall incur the following penalties per violation:

(a) For 1st offense: \$300;

(b) For 2nd offense: \$500;

(c) For 3rd offense: \$1,000.

(17) Failing to obtain a signed medical waiver is a violation of ORS 694.142(6) and OAR 331-640-0040(2) and shall incur the following penalties per violation:

(a) For 1st offense: \$300;

(b) For 2nd offense: \$500;

(c) For 3rd offense: \$1,000.

(18) Failing to respond timely to an agency request for information regarding a complaint is a violation of OAR 331-020-0050 and shall incur the following penalties per violation:

(a) For 1st offense: \$300;

(b) For 2nd offense: \$500;

(c) For 3rd offense: \$1,000 in addition to any other penalties allowed by law including probation, suspension, revocation or refusal to issue a license.

(19) Failing to comply with the additional standards of conduct is a violation of ORS 676.612(1)(j) and OAR 331-640-0050(1), (2), (3) and/or (4) and shall incur the following penalties per violation:

(a) For 1st offense: \$500;

(b) For 2nd offense: \$1,000;

(c) For 3rd offense: \$5,000 in addition to any other penalties allowed by law including probation, suspension, revocation or refusal to issue a license.

(20) Failing or refusing to rescind the sale of a hearing aid is a violation of ORS 676.612(1)(j) and (2), 694.042(4), and 694.147(2)(a) and shall incur a civil penalty established on a case-by-case basis.

(21) Failing to meet professional standards in dealing in hearing aids in violation of ORS 676.612(1)(j), 694.147(2)(c) or OAR 331-640-0050(3) and shall incur the following penalties per violation:

(a) For 1st offense: \$500;

(b) For 2nd offense: \$1,000;

(c) For 3rd offense: \$5,000 in addition to any other penalties allowed by law including probation, suspension, revocation or refusal to issue a license.

(22) Fraud or misrepresentation in the practice of dealing in hearing aids is a violation of ORS 676.612, 694.147(2) or OAR 331-640-0050(3) and shall incur the following penalties per violation:

(a) For 1st offense: \$500;

(b) For 2nd offense: \$1,000;

(c) For 3rd offense: \$5,000 in addition to any other penalties allowed by law including probation, suspension, revocation or refusal to issue a license.

(23) Unprofessional conduct is a violation of ORS 676.612(1)(j), 694.147(2)(c) or OAR 331-640-0050(3) and shall incur the following penalties per violation:

(a) For 1st offense: \$500;

(b) For 2nd offense: \$1,000;

(c) For 3rd offense: \$5,000 in addition to any other penalties allowed by law including probation, suspension, revocation or refusal to issue a license.

Stat. Auth.: ORS 676.615, 676.992 & 694.147

Stats. Implemented: ORS 676.615, 676.992 & 694.147

Hist.: HD 8-1990, f. 4-4-90, cert. ef. 4-5-90; HD 23-1993, f. 12-30-93, cert. ef. 1-1-94; HD 18-1997, f. 12-12-97, cert. ef. 12-15-97; Renumbered from 333-025-0075, HLO 6-2004, f. 6-29-04, cert. ef. 7-1-04

331-650-0015

Continuing Education: Audit, Required Documentation and Sanctions

(1) The Oregon Health Licensing Agency will audit a percentage of licensees, as determined by the Board, to verify compliance with continuing education requirements of this rule.

(2) Licensees notified of selection for audit of continuing education attestation shall submit to the agency, within 30 calendar days from the date of issuance of the notification, satisfactory evidence of participation in required continuing education in accordance with OAR 331-650-0005.

(3) If selected for audit, the licensee must provide documentation of the required continuing education, which must include:

(a) For courses provided by an accredited college or university – An official transcript from the accredited college or university;

(b) For International Hearing Society (IHS) approved programs or courses – A certificate of completion that includes the IHS approval number; or

(c) For agency pre-approved programs or courses – A certificate of completion or other agency approved documentation that includes the agency pre-approval number.

(4) If documentation of continuing education is incomplete, the licensee has 30 calendar days from the date of notice to submit further documentation to substantiate having completed the required continuing education.

(5) Failure to meet continuing education requirements shall constitute grounds for disciplinary action, which may include but is not limited to assessment of a civil penalty and suspension or revocation of the license.

Stat. Auth.: ORS 376.615, 694.115, 694.170, 694.185

Stats. Implemented: ORS 694.025, 694.125, 694.185

Hist.: HLA 13-2012, f. 8-16-12, cert. ef. 8-17-12

DIVISION 660

STANDARD OF PRACTICE AND
PROFESSIONAL CONDUCT

331-660-0000

Standards of Practice

In addition to the standards prescribed under ORS 694.142, the Council adopts the following standards of practice to establish and maintain a high standard of integrity and dignity in the profession of hearing aid specialists. A licensee must:

- (1) Maintain a clean and safe environment to ensure the health, safety, and welfare of clients and staff in the licensee's facility;
- (2) Ensure consistent and high quality services and devices that meets the needs of the hearing aid clients;
- (3) Participate, as appropriate, with the ownership, management, or governing body to plan, implement, and evaluate written policies and procedures to allow that provision of hearing aid services are in compliance with all local, state, and federal laws and regulations;
- (4) Communicate and problem solve regularly with the staff, co-workers and governing body to allocate resources properly. The hearing aid specialist must foster effective communication and problem solving between staff, co-workers, governing body and clients; and
- (5) Plan, implement, and evaluate an integrated financial program to ensure compliance with all local, state, and federal laws and regulations; quality devices and services; and appropriate and accurate billing for devices and services.

Stat. Auth.: ORS 376.615, 694.115, 694.170, 694.185

Stats. Implemented: ORS 694.025, 694.125, 694.185

Hist.: HLA 13-2012, f. 8-16-12, cert. ef. 8-17-12

331-660-0010

Standards of Professional Conduct

The Council adopts the following standards of professional conduct to protect the public against unprofessional conduct on the part of hearing aid specialists. A licensee must:

- (1) Comply with all local, state, and federal laws and regulations concerning the provision of hearing aids. The licensed hearing aid specialist shall cooperate with any investigation of the regulatory bodies;
- (2) Exercise appropriate supervision and responsibility over the activities of staff;
- (3) Protect client's rights as required by state and federal laws;
- (4) Take appropriate steps to avoid discrimination against residents on basis of race, color, sex, religion, age, national origin, disability, marital status, ancestry, sexual orientation or any other factor that may be discriminatory or not related to bona fide requirements of quality service; and
- (5) Possess and maintain the competencies necessary to effectively perform the responsibilities as a hearing aid specialist, including but not limited to:
 - (a) Exercising ethical and professional decision-making and judgment;
 - (b) Exemplifying a philosophy focused on the provision of accurate and high-quality services and devices, as well as on generally accepted standards;
 - (c) Abiding by and keeping confidential client information; and
 - (d) Keeping current with standards of practice.

Stat. Auth.: ORS 376.615, 694.115, 694.170, 694.185

Stats. Implemented: ORS 694.025, 694.125, 694.185

Hist.: HLA 13-2012, f. 8-16-12, cert. ef. 8-17-12

331-660-0020

Safety and Infection Control Requirements

- (1) Each licensee shall keep areas of their facility for otoscopic examination, earmold impression taking, and audiometric examination clean and sanitary.
- (2) Impression tools, otoscopic examination equipment and other devices that come in direct contact with the client must be disinfected prior to use. Licensees shall use an EPA registered high-level disinfectant, following the manufacturer's directions, to disinfect nondisposable equipment and tools.
- (3) Disposable or disinfected otoscopic specula must be used when examining each ear.
- (4) Licensees must wash or sanitize hands prior to taking an earmold impression.

- (5) Licensees must observe the Universal Precautions as defined in Oregon Administrative Rule 437-002-0360(26), and 29 CFR 1910.1030 bloodborne pathogen standards, when providing services to consumers. Precautions to reduce the likelihood of exposure include hand washing, gloving, using personal protective equipment, preventing injury, ensuring proper handling and disposal of needles and other sharp instruments and of products or equipment contaminated with blood and body fluids.

Stat. Auth.: ORS 376.615, 694.115, 694.170, 694.185

Stats. Implemented: ORS 694.025, 694.125, 694.185

Hist.: HLA 13-2012, f. 8-16-12, cert. ef. 8-17-12

331-660-0030

Audiometric Testing Equipment

Licensed hearing aid specialists shall maintain audiometric testing equipment, currently used in the practice of administering evaluations, in proper working order at all times and shall be prepared to provide their record of at least annual calibration to a representative of the agency when so requested, upon inspection, or during an investigation conducted by the agency.

Stat. Auth.: ORS 376.615, 694.115, 694.170, 694.185

Stats. Implemented: ORS 694.025, 694.125, 694.185

Hist.: HLA 13-2012, f. 8-16-12, cert. ef. 8-17-12

331-660-0040

Statement to Prospective Purchaser

(1) The term "purchaser" as used in ORS chapter 694 and OAR chapter 331, division 660, means any person who purchases or proposes to purchase hearing aid(s) and any person on whose behalf hearing aid(s) are purchased or proposed to be purchased. In the case of a client who is a minor child or other person without legal capacity to contract, the person's parent, legal guardian, or legal representative is the "purchaser."

(2) To assist prospective purchasers in making an informed decision regarding the sale of hearing aid(s), licensees must provide prospective purchasers with complete and accurate disclosure of facts regarding licensee services, the hearing aid(s) purchase price, delivery and consummation of sale defined in OAR 331-620-0005, and information about the purchaser's right to rescind or cancel a sale and the procedures for rescinding the sale and returning the hearing aid(s) according to the provisions of ORS 694.042.

(3) The Statement to Prospective Purchaser (Statement) is a contract prepared and signed by the licensee and agreed to by the purchaser. This Statement contains required information listed in ORS 694.036 regarding licensee and purchaser information, medical observation criteria and referral to physician if medical conditions are present, specifications and conditions of the hearing aid(s), terms of any warranty or expressed guarantee, and how to file a complaint with the agency.

(4) Licensees are required to provide all information and facts specified in this rule before the consummation of the sale, which is the delivery of the hearing aid(s) to the purchaser and the date that starts the 30-day rescission period.

(5) Statement Content. In addition to the information prescribed by ORS 694.036, the Statement must include the following information and facts about the purchase of hearing aid(s):

- (a) Date of sale;
- (b) Purchaser name, address and signature;
- (c) Licensee name, address, telephone number, license number and signature;
- (d) The purchase price, which includes the cost of the hearing aid(s) and all related fees;
- (e) An accurate description of the hearing aid as new, demonstration instrument, reconditioned, or used;
- (f) Delivery date of hearing aid(s);
- (g) Date the 30-day rescission period ends;
- (h) The portion of the total purchase price that will be retained by the licensee, not to exceed 10% of the contract purchase amount or \$250 per hearing aid, whichever amount is less, if the purchaser rescinds the sale under provisions of ORS 694.042 within the 30-day rescission period;
- (i) Date and place of post-delivery follow-up session agreed upon by the licensee and hearing aid user as stated in subsection (9) of this rule;

(j) A printed or reproduced copy of ORS 694.042 Right to Rescind A Hearing Aid Purchase in its entirety, which includes the procedures for returning the hearing aid(s) to the licensee;

(k) The following statement, initialed by the purchaser: "Copies of my audiogram and the results of tests or verification procedures were offered to me by the licensee, and I hereby acknowledge receipt of the records or that I declined the offer.";

(l) The following statement about filing complaints: "Complaints regarding the sale, lease, or attempted sale or lease of hearing aids should be directed in writing to: Oregon Health Licensing Agency, 700 Summer Street NE, Suite 320, Salem, OR 97301-1287. Complaint forms may be obtained by calling 503-378-8667 or at the Agency's Web site: http://www.oregon.gov/OHLA/Consumer_help_complaint.shtml"; and

(m) A statement acknowledging that the purchaser has read and understands the information contained in the Statement, signed by the purchaser and dated;

(6) Statement Format. The Statement must be printed on forms measuring no less than 8 ½ inches wide by 11 inches long, with a minimum 10-point typeset, and be legibly written.

(7) Licensees must provide the purchaser a new Statement for each hearing aid or set of hearing aids, unless the hearing aid(s) is an exact replacement of the device listed in a previous Statement provided to the purchaser.

(8) Refund. Any monies paid by or on behalf of the purchaser toward the hearing aid must be refunded to the payer if the delivery of the hearing aid to the purchaser is cancelled. The purchaser shall incur no additional liability for the cancellation.

(9) Post Delivery Follow-Up. Licensees will conduct and document a minimum of one post-delivery follow-up session with the hearing aid user before the expiration of the 30-day rescission period. The follow-up session will take place at the original place of the sale or at a predetermined location agreed upon at the time of initial delivery, or at a time and place agreed to within the 30-day rescission period.

(b) The licensee must document in the hearing aid user's record any change to the agreed-upon location or date of the post-delivery follow-up session, and, if the licensee is unable to contact the hearing aid user or to provide the follow-up session, the reason(s) why.

(10) In Home Sales. Sales of hearing aids made at the purchaser's residence and not at the licensee's place of business, require disclosure of federal guidelines related to "in home sales" and the purchaser's right to cancel the transaction and receive a full refund of monies paid to the licensee. The following federal disclosure statement must be completed and affixed to the Statement to Prospective Purchaser when a licensee sells a hearing aid(s) at the purchaser's home.

[ED. NOTE: Forms referenced are available from the agency.]

Stat. Auth.: ORS 376.615, 694.115, 694.170, 694.185

Stats. Implemented: ORS 694.025, 694.125, 694.185

Hist.: HLA 13-2012, f. 8-16-12, cert. ef. 8-17-12

331-660-0050

Additional Conditions for Referral

(1) In addition to the conditions listed in ORS 694.142 a hearing aid specialist shall not fit or dispense a hearing aid for use without first determining if the following conditions exist and, if so, referring the prospective purchaser to a physician:

(a) Evidence of significant cerumen accumulation in the auditory canal preventing visual inspection of the external auditory canal or external auditory meatus and tympanic membrane or foreign body in the ear canal; or

(b) Pain or discomfort in the ear.

(2) A Waiver of Medical Opinion form as required by ORS 694.142(6) must include the hearing aid specialist's name and license number, the purchaser's name, address and signature with date as well as the following statement: "I do not desire to have a medical evaluation before purchasing a hearing aid."

Stat. Auth.: ORS 376.615, 694.115, 694.170, 694.185

Stats. Implemented: ORS 694.025, 694.125, 694.185

Hist.: HLA 13-2012, f. 8-16-12, cert. ef. 8-17-12

331-660-0060

Standards of Conduct

(1) Licensees must comply with the requirements of ORS 694.142, and all other applicable statutes and rules.

(2) Licensees must conform to state or federal laws regulating retail contracts or to any affirmation of fact or promise made in writing by the licensee which relates to the hearing aid or fitting and dispensing services and which becomes a part of the basis of the transaction when the purchaser relies on it or is, in part, induced into making purchase by it.

(3) Licensees must not make inaccurate or misleading representations or statements as to the efficacy of a hearing aid(s) for improving hearing.

(4) Licensees may not use a title or abbreviation that is misleading or may convey that the licensee holds a credential that is not related to hearing instrument sciences, without designating the professional field for which the credential was issued. Hearing instrument sciences includes, but is not limited to, core competencies identified in ORS 694.075.

(5) The Council recognizes and adopts the revised International Hearing Society's Code of Ethics, as adopted October 1983 and revised March 2009, as its professional standards model. A copy of the document is on file at the agency for review, and may be accessed at the following Web site: http://insinfo.org/lhsV2/Resources/020_Code_Of_Ethics.cfm

(6) During the hearing test or evaluation for fitting a client with a hearing aid(s), the following items must be completed. If the case history and tests were completed within the previous six months and there has been no substantial change in the client's hearing, the following tests may be performed at the discretion of the licensee:

(a) Confidential client case history;

(b) Puretone Air Conduction Threshold testing (should include at a minimum, the following frequencies — 250, 500, 1000, 2000, 3000, 4000, and 6000 or 8000 Hz);

(c) Puretone Bone Conduction Threshold testing (should include at a minimum, the following frequencies — 500, 1000, 2000, and 4000 Hz);

(d) Speech Recognition Threshold testing (SRT);

(e) Word Recognition Score (WRS) also known as speech discrimination testing;

(f) Most Comfortable Listening Level (MCL); and

(g) Uncomfortable Listening Level (UCL).

(7) For children who are unable to perform the tests listed in subsection (6) of this rule, an objective measure that meets prevailing professional standards can be used to assess auditory function. The test must be completed by a licensed audiologist or physician.

(8) Licensees must perform one or more of the following verification procedures, within the 30-day rescission period.

(a) Soundfield testing for speech discrimination;

(b) Soundfield testing for puretone thresholds;

(c) Real-ear probe microphone measurements;

(d) Speech mapping; and

(e) Other industry accepted objective measures.

(9) Licensees must post the following statement in public view on the business premises or provide the purchaser with a written notice stating: "Individuals are entitled to a copy of the audiogram used to conduct hearing evaluations and any test results." If copies of the audiogram specified in OAR 331-660-0070, or results of tests or verification procedures conducted under subsections (6) and (8) of this rule are requested, they must be provided to the purchaser.

(10) Licensees who are unable to complete testing for reasons such as a client's medical condition or inability to perform tests or verification procedures are excused from compliance with the relevant parts of subsections (6) and (8) but must document the reasons in the client's record.

(11) Tests listed in subsection (8) of this rule will be used to determine the fitted hearing aid(s) ability to meet current industry standards in reference to ORS 694.042(1)(c), during investigation of complaints filed with the agency.

(12) Licensees must maintain a record of the technical specifications issued by a manufacturer for the hearing aid(s) that have been delivered to or purchased by their clients. The specifications must be available for inspection by the agency's representatives upon request.

Stat. Auth.: ORS 376.615, 694.115, 694.170, 694.185

Stats. Implemented: ORS 694.025, 694.125, 694.185

Hist.: HLA 13-2012, f. 8-16-12, cert. ef. 8-17-12

331-660-0070**Uniform Measurement Standards**

(1) The Council recognizes and adopts the following uniform set of hearing loss measurement standards required for use when interpreting audiograms using 0 — 110 for degrees of decibel hearing loss (dB HL) and 125 — 8000 Hz for frequency. This set of uniform measurement standards must be used for advising consumers on peripheral or cochlear hearing loss: [Table not included. See ED. NOTE.]

(2) Hearing loss may have a greater effect on children than adults. The degree of hearing loss does not necessarily reflect the degree of impairment.

[ED. NOTE: Tables referenced are available from the agency.]

Stat. Auth.: ORS 376.615, 694.115, 694.170, 694.185

Stats. Implemented: ORS 694.025, 694.125, 694.185

Hist.: HLA 13-2012, f. 8-16-12, cert. ef. 8-17-12

331-660-0080**Client Record Requirements**

(1) For the purpose of clarifying record keeping requirements, the term “client” as used in this rule, means the individual who is a consumer, purchaser, potential purchaser or hearing-aid wearer.

(2) Required Records. Licensees must record, update and maintain documentation for each client relevant to health history, clinical examinations and treatment, and financial data. Documentation shall be written or computerized. Records must include the following information:

(a) Basic client information, including name, address, telephone number and dates of service;

(b) Health history relevant to hearing evaluation or fitting of a hearing aid(s), including referral to a physician or a Waiver of Medical Opinion form required by ORS 694.142(6);

(c) Identification of any conditions that would require referral to a physician licensed under ORS chapter 677, as required in ORS 694.142(1) and OAR 331-660-0050, and a notation that the client was referred;

(d) Audiograms as specified in OAR 331-660-0070 and results of tests or verification procedures as specified in OAR 331-660-0060;

(e) A copy of the Statement to Prospective Purchaser required by ORS 694.036 and OAR 331-660-0040, including client’s signature and date acknowledging that the client has read and understands the information contained in the purchase agreement;

(f) A copy of the Right to Rescind a Hearing Aid Purchase giving notice of rights under ORS 694.042; and

(g) Date and description of services rendered in the form of “chart notes”, including any complications. Chart notes must include the recorder’s initials, license number and professional title if multiple practitioners provide service to the client.

(3) Record Format. Records and documentation must be accurate, complete, and legible, typed or recorded using ink. Legible hand-written or electronic records are acceptable.

(4) Record Identifiers. Client records listed in subsection (1) of the rule, must include the licensee’s name, license number, professional title or abbreviation, and signature or initials somewhere on the documentation as a means of identifying the person who is providing service to the client. This information may be affixed to the record(s) in the form of a professional stamp or handwritten entry.

(5) Record Retention. All client records and documentation, written or archived electronically by computer, must be stored and maintained for a minimum of seven years after the licensee has last seen the client or past the age of minority, so that the records are safeguarded, readily retrievable, and available for inspection by the Oregon Health Licensing Agency’s representative.

Stat. Auth.: ORS 376.615, 694.115, 694.170, 694.185

Stats. Implemented: ORS 694.025, 694.125, 694.185

Hist.: HLA 13-2012, f. 8-16-12, cert. ef. 8-17-12

DIVISION 705

**RESPIRATORY THERAPIST AND
POLYSOMNOGRAPHIC TECHNOLOGISTS LICENSING
BOARD — GENERAL ADMINISTRATION**

331-705-0050**Definitions**

The following definitions apply to OAR 331-705-0000 through 331-720-0020:

(1) “Affidavit of Licensure” means an original document or other approved means of verifying an authorization to practice (certification, licensure or registration) status and history, including information disclosing all unresolved or outstanding penalties and/or disciplinary actions. Refer to OAR 331-030-0040.

(2) “Agency” means the Oregon Health Licensing Agency.

(3) “AASM” means the American Academy of Sleep Medicine.

(4) “A-STEP” means the Accredited Sleep Technology Education Program.

(5) “BRPT” means Board of Registered Polysomnographic Technologists.

(6) “CAAHEP” means Commission on Accreditation of Allied Health Education Programs.

(7) “CoARC” means Commission on Accreditation for Respiratory Care.

(8) “CRT” means Certified Respiratory Therapist.

(9) “NBRC” means the National Board for Respiratory Care.

(10) “Official transcript” means an original document authorized by the appropriate office in the Oregon Department of Education and certified by a college or university indicating applicant identity information, hours and types of course work, examinations and scores that the student has completed. Original documents must be submitted directly to the Agency from the college or university by United States Postal Service mail or other recognized mail service providers in a sealed envelope; or

(11) “RPSGT” means Registered Polysomnographic Technologists.

(12) “RRT” means Registered Respiratory Therapist.

(13) “Qualified Medical Director for Polysomnography” has the definition set forth in ORS Chapter 688.800.

(14) “Qualified Medical Director for Respiratory Care” has the definition set forth in ORS Chapter 688.800.

Stat. Auth.: ORS 676.605, 676.615 & 688.830

Stats. Implemented: ORS 676.605, 676.615 & 688.830

Hist.: HDLB 1-1997(Temp), f. 12-19-97, cert. ef. 12-22-97 thru 6-19-98; HDLP 2-1998, f. & cert. ef. 6-15-98; HLO 4-2004, f. 6-29-04, cert. ef. 7-1-04; HLA 7-2010, f. & cert. ef. 11-1-10; HLA 15-2011, f. 12-30-11, cert. ef. 1-1-12

331-705-0072**Sleep Lab Exemption**

This rule is in effect through January 1, 2013, upon requirement for licensure for polysomnographic technologists.

(1) The following are exempt from the definition of Respiratory Care Services under ORS 688.800(7) when performed in a sleep lab environment:

(a) Positive airway pressure titration on spontaneously breathing patients;

(b) Supplemental low-flow oxygen therapy during polysomnogram (up to 6 liters per minute);

(c) Capnography during polysomnogram;

(d) Cardiopulmonary resuscitation;

(e) Pulse oximetry;

(f) Electrocardiography;

(g) Respiratory effort including thoracic and abdominal;

(h) Plethysmography blood flow;

(i) Nasal and oral airflow monitoring;

(j) Monitoring the effects positive airway pressure, used to treat sleep-related breathing disorders, has on sleep patterns, provided that the device does not extend into the trachea;

(k) Monitoring the effect on sleep patterns of an oral device that does not extend into the trachea and that is used to treat sleep apnea;

(l) Maintenance of nasal and oral airways that do not extend into the trachea;

(m) The use of continuous positive airway pressure and bi-level modalities;

(n) Set-up for use of durable medical equipment; and

(o) Long term follow-up care.

(2) For the purpose of this rule, “sleep lab” is:

(a) A physical space, including any commercial space, used by a hospital for conducting sleep testing and under the supervision of a medical director; or

(b) A facility accredited by the American Academy of Sleep Medicine (AASM) or the Joint Commission for conducting sleep testing under the supervision of a medical director.

(c) A facility provisionally accredited by the AASM for conducting sleep testing under the supervision of a medical director.

(3) For purpose of this rule, “medical director” means the medical director of any inpatient or outpatient facility or department who is a physician licensed by the State of Oregon and who has special interest and knowledge in the diagnosis and treatment of sleep disorders.

(4) For the purpose of this rule, “sleep lab” does not include the home environment.

(5) The exemption under this rule does not include partial or full ventilatory support services involving tidal volume regulation or which require the setting of respiratory back-up rates unless these services are for the treatment of central and mixed sleep apnea.

(6) All documentation and information regarding the provisional accreditation or accreditation through the AASM must be made available to the Agency if requested.

(7) All policies, procedures and protocols for unlicensed individuals related to positive airway pressure treatment and titration including but not limited to central and mixed sleep apnea must be made available to the Agency if requested.

Stat. Auth.: ORS 676.606, 676.607, 676.611, 676.615, 688.830

Stats. Implemented: ORS 688.800, 688.805

Hist.: HLA 13-2011(Temp), f. & cert. ef. 11-22-11 thru 5-10-12; HLA 15-2011, f. 12-30-11, cert. ef. 1-1-12

331-705-0080

Licensure Exemption for Supervisors and Polysomnography Students

(1) Students actively enrolled in the following education programs are exempt from polysomnographic technologist licensure pursuant to ORS 688.805(2)(b)(A):

(a) Associate’s degree program in polysomnography, polysomnographic technology, or sleep technology from an accredited community college, college, or university; or

(b) Polysomnography course of study from a CAAHEP accredited institution;

(2) In accordance with ORS 688.805(2)(b)(B) to be exempt from licensure students in subsection (1) of this rule must be supervised by one of the following:

(a) A licensed polysomnographic technician;

(b) A qualified medical director for polysomnography; or

(c) Respiratory therapist who holds a Sleep Disorder Specialty credential through the NBRC.

(3) Direct supervision, for the purpose of this rule, is supervision of a student in polysomnography by an approved supervisor who is physically present with the student while the student is working. The supervisor must exercise direction and control over the student’s work. An approved supervisor supervising a student may not supervise more than one student per shift.

Stat. Auth.: ORS 676.606, 676.607, 676.611, 676.615, 688.830

Stats. Implemented: ORS 688.800, 688.805

Hist.: HLA 15-2011, f. 12-30-11, cert. ef. 1-1-12

DIVISION 710

RESPIRATORY THERAPIST AND POLYSOMNOGRAPHIC TECHNOLOGISTS LICENSING BOARD — APPLICATION FOR LICENSURE

331-710-0000

Training

Training, or formal education, required for licensure is a planned sequence of instruction of specific content, pursuant to ORS

688.815(1)(c), structured to meet stated curriculum objectives which includes evaluation of attainment of those objectives, and offered by a post-secondary educational institution accredited by the *Committee On Accreditation For Respiratory Care*, or its successors, or recognized by the *National Board for Respiratory Care*.

Stat. Auth.: ORS 676.605, 676.615, 688.815 & 688.830

Stats. Implemented: ORS 676.605, 676.615, 688.815 & 688.830

Hist.: HDLB 1-1997(Temp), f. 12-19-97, cert. ef. 12-22-97 thru 6-19-98; HDLP 2-1998, f. & cert. ef. 6-15-98; HLO 4-2004, f. 6-29-04, cert. ef. 7-1-04

331-710-0005

Respiratory Therapist License

(1) A respiratory therapist license holder, licensed under ORS 688.815, may perform respiratory care services and polysomnography services defined under ORS 688.800.

(2) A respiratory therapist license is good for one year and becomes inactive on the last day of the month one year from the date of issuance.

Stat. Auth.: ORS 676.605, 676.615, 688.815 & 688.830

Stats. Implemented: ORS 676.605, 676.615, 688.815 & 688.830

Hist.: HLA 15-2011, f. 12-30-11, cert. ef. 1-1-12

331-710-0010

Application Requirements for a Respiratory Therapist License

An individual applying for licensure to practice respiratory care must:

(1) Meet the requirements of OAR 331 division 30.

(2) Submit a completed application form prescribed by the Agency, which must contain the information listed in OAR 331-030-0000 and be accompanied by payment of the required application and license fees.

(3) Submit fingerprint-based national criminal background check pursuant to OAR 331-030-0004;

(4) Be at least 18 years of age and provide official documentation confirming date of birth, such as a copy of the birth certificate, driver’s license, passport or military/government identification;

(5) Submit proof of having a high school diploma or equivalent; and

(6) Submit current certification in cardiopulmonary resuscitation from an Agency approved provider; and

(7) Submit documentation of qualification for licensure through one of the following pathways:

(a)(A) License Pathway One — National Credentialing: An applicant for licensure through national credentialing must submit:

(B) An official documentation demonstrating that the applicant has successfully passed the Board approved examination listed under OAR 331-712-0000, within two years before the date of application. The documentation of a passing score must be mailed by the organization to the Agency. Copies of examination results or other documentation provided by the applicant are not acceptable.

NOTE: The applicant is responsible for payment of fees assessed by the organization when obtaining required official documentation.

(b) License Pathway Two — Reciprocity

An applicant for licensure through reciprocity must submit:

(A) Submit an affidavit of licensure pursuant to OAR 331-030-0040, from every state where the applicant has been licensed as a respiratory therapist, including an affidavit of licensure demonstrating proof of a current respiratory therapist license from another state, obtained through qualifications substantially equivalent to Oregon’s requirements. At least one of the applicant’s out-of-state licenses must be active and all of the applicant’s out-of-state licenses must not be subject to current or pending disciplinary action, and must be free from disciplinary history for three years before the date of application for Oregon respiratory therapist licensure;

(B) Official documentation demonstrating that the applicant has successfully passed the Board approved examination listed under OAR 331-712-0000. The documentation of a passing score must be mailed by the organization to the Agency. Copies of examination results or other documentation provided by the applicant are not acceptable.

NOTE: The applicant is responsible for payment of any service fee the originating jurisdiction may assess for producing the Affidavit of Licensure.

Stat. Auth.: ORS 676.605, 676.615, 688.815 & 688.830

Stats. Implemented: ORS 676.605, 676.615, 688.815 & 688.830

Hist.: HDLB 1-1997(Temp), f. 12-19-97, cert. ef. 12-22-97 thru 6-19-98; HDLP 2-1998, f. & cert. ef. 6-15-98; HLO 4-2004, f. 6-29-04, cert. ef. 7-1-04; HLO 10-2004(Temp), f. & cert. ef. 11-8-04 thru 3-31-05; HLO 1-2005, f. 2-28-05 cert. ef. 3-1-05; HLA 7-2010, f. & cert. ef. 11-1-10; HLA 15-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 14-2012, f. 9-12-12, cert. ef. 9-14-12

331-710-0015

Temporary Respiratory Therapist Licensure

(1) A respiratory therapist temporary license authorizes a holder to practice respiratory care under supervision and pending passage of the qualifying examination.

(2) For the purpose of this rule supervision means the required presence of a licensed respiratory therapist or qualified Medical Director for respiratory care within the work location at the same time as the respiratory therapist temporary license holder.

(3) A respiratory therapist temporary license holder must notify the Agency within 10 calendar days of changes in employment status or supervisor.

(4) A respiratory therapy temporary license is valid for six months and may not be renewed.

Stat. Auth.: ORS 676.605, 676.615, 688.815 & 688.830
Stats. Implemented: ORS 676.605, 676.615, 688.815 & 688.830
Hist.: HLA 15-2011, f. 12-30-11, cert. ef. 1-1-12

331-710-0020

Application Requirements for a Temporary Respiratory Therapist License

To qualify for a respiratory therapist temporary license for the applicant must:

(1) Meet the requirements of OAR 331 division 30;

(2) Submit a completed application form prescribed by the Agency, which must contain the information listed in OAR 331-030-0000 and be accompanied by payment of the required application and license fees;

(3) Submit fingerprint-based national criminal background check pursuant to OAR 331-030-0004;

(4) Be at least 18 years of age, and provide official documentation confirming the applicant's date of birth, such as a copy of the birth certificate, driver's license, or passport;

(5) Submit current certification in cardiopulmonary resuscitation from an Agency approved provider;

(6) Submit a statement, signed by the Registrar or a Dean of a college or university and sent directly to the Agency from that college or university, verifying the applicant has completed all work necessary to obtain a degree in respiratory care; and

(7) Submit documentation identifying approved supervisor on a form prescribed by the Agency.

Stat. Auth.: ORS 676.605, 676.615, 688.815 & 688.830
Stats. Implemented: ORS 676.605, 676.615, 688.815 & 688.830
Hist.: HDLB 1-1997(Temp), f. 12-19-97, cert. ef. 12-22-97 thru 6-19-98; HDLP 2-1998, f. & cert. ef. 6-15-98; HLO 4-2004, f. 6-29-04, cert. ef. 7-1-04; HLA 7-2010, f. & cert. ef. 11-1-10; HLA 15-2011, f. 12-30-11, cert. ef. 1-1-12

331-710-0040

Polysomnographic Technologists Grandfathering Requirements

(1) Pursuant to Oregon Laws 2011, Chapter 715, Sections 7 and 9, polysomnographic technologists must be licensed by January 1, 2013. A polysomnographic technologist license is valid for one year and becomes inactive on the last day of the month one year from the date of issuance.

(2) An individual applying for licensure who does not meet the requirements listed in Oregon Laws 2011, Chapter 715, Section 8, may be grandfathered into licensure by meeting the requirements of this rule on or before January 1, 2013. An applicant applying for licensure to practice polysomnography through the grandfathering process must:

(a) Meet the requirements of OAR chapter 331 division 30;

(b) Submit a completed application form prescribed by the Agency, which must contain the information listed in OAR 331-030-0000 and be accompanied by payment of the required application fees;

(c) Submit fingerprint-based national criminal background check pursuant to OAR 331-030-0004;

(d) Be at least 18 years of age and provide official documentation confirming date of birth, such as a copy of the applicant's birth certificate, driver's license, or passport;

(e) Submit proof of having a high school diploma or equivalent; and

(f) Submit current certification in cardiopulmonary resuscitation by an Agency approved provider;

(g) Submit proof of having obtained national credential as an RPSGT from the BRPT. Proof of national credentialing must be

mailed to the Agency directly from the BRPT; copies of national credentialing mailed by the applicant are not acceptable;

(h) Submit official documentation verifying current registration with the BRPT at the time of application for Oregon licensure;

(i) Submit documentation of having work experience listed under OAR 331-710-0110 in polysomnography for at least 18 months of the last five years, on an Agency prescribed form.

(j) Submit examination fees;

(k) Submit satisfactory evidence of having passed the Board approved examination listed under OAR 331-712-0010(3) within two years before the date of application; and

(l) Submit appropriate licensing fees.

Stat. Auth.: ORS 676.605, 676.615, 688.815 & 688.830
Stats. Implemented: ORS 676.605, 676.615, 688.815 & 688.830
Hist.: HLA 15-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 14-2012, f. 9-12-12, cert. ef. 9-14-12

331-710-0045

Polysomnographic Technologist License

(1) A polysomnographic technologist, licensed under ORS 688.815, may perform polysomnography services defined under ORS 688.800.

(2) A polysomnographic technologist license is good for one year and becomes inactive on the last day of the month one year from the date of issuance.

Stat. Auth.: ORS 676.605, 676.615, 688.815 & 688.830
Stats. Implemented: ORS 676.605, 676.615, 688.815 & 688.830
Hist.: HLA 15-2011, f. 12-30-11, cert. ef. 1-1-12

331-710-0050

Application Requirements for Polysomnographic Technologist License

(1) Provisions of this rule become effective October 15, 2012. Pursuant to Oregon Laws 2011, Chapter 715, Sections 7 and 9, polysomnographic technologists must be licensed by January 1, 2013.

(2) An individual applying for licensure to practice polysomnography who does not meet the grandfathering requirements or who applies for licensure after January 1, 2013 must:

(a) Meet the requirements of OAR chapter 331 division 30;

(b) Submit a completed application form prescribed by the Agency, containing the information listed in OAR 331-030-0000 and accompanied by payment of the required application fees;

(c) Submit fingerprint-based national criminal background check pursuant to OAR 331-030-0004;

(d) Be at least 18 years of age, and must provide documentation, confirming date of birth, such as a copy of the birth certificate, driver's license or passport;

(e) Submit proof of having a high school diploma or equivalent;

(f) Submit current certification in cardiopulmonary resuscitation by an Agency approved provider; and

(3) Submit documentation of qualification through one of the following pathways:

(a) **License Pathway One — Academic Degree:** An applicant under pathway one must:

(A) Submit official transcripts defined under OAR 331-705-0050 showing successful completion of an Associate's degree in polysomnography, polysomnographic technology, or sleep technology from an accredited community college, college or university, or successful completion of a polysomnography course of study from a CAAHEP accredited institution;

(B) Submit satisfactory evidence of passage a Board approved examination listed under OAR 331-712-0010(1) within two years before the date of application. Examination results must be submitted to the Agency directly from the examination provider; examination results or other documentation provided directly by the applicant are not acceptable;

(C) Submit examination fees;

(D) Submit satisfactory evidence of having passed the Board approved examination listed under OAR 331-712-0010(3) within two years before the date of application; and

(E) Submit licensing fees.

(b) **License Pathway Two — Polysomnographic Technologist Temporary Licensee:** applying for permanent licensure must:

(A) Submit documentation showing completion of 18 months of work experience pursuant to OAR 331-710-0110, obtained under

polysomnographic technologist temporary-DS licensure (See 331-710-0060) and temporary-IS licensure (See 331-710-0080), including verification by an approved supervisor pursuant to 331-710-0100, and certification of successful completion and satisfactory performance of such experience by a qualified medical director for polysomnography, all on forms provided by the Agency;

(B) Submit satisfactory evidence of passage of a Board approved examination listed under OAR 331-712-0010(1) or (2) within two years before the date of application. Examination results must be submitted to the Agency directly from the examination provider; examination results or other documentation provided directly by the applicant are not acceptable;

(C) Submit examination fees;

(D) Submit satisfactory evidence of having passed the Board approved examination listed under OAR 331-712-0010(3) within two years before the date of application; and

(E) Submit licensing fees.

(c) **License Pathway Three — Reciprocity:** An applicant for licensure by reciprocity must:

(A) Submit an affidavit of licensure pursuant to OAR 331-030-0040, from every state where the applicant has been licensed as a polysomnographic technologist, including an affidavit of licensure demonstrating proof of a current polysomnographic technologist license from another state, obtained through qualifications substantially equivalent to Oregon's requirements. At least one of the applicant's out-of-state licenses must be active and all of the applicant's out-of-state licenses must not be subject to current or pending disciplinary action, and must be free from disciplinary history for three years before the date of application for Oregon polysomnographic licensure;

(B) Submit satisfactory evidence of having passed the Board approved examination listed under OAR 331-712-0010(3) within two years before the date of application; and

(C) Submit licensing fees.

(d) **License Pathway Four — Endorsement: An applicant may qualify for licensure by endorsement if the applicant holds a qualifying professional credential in another field.** An applicant for licensure by endorsement must:

(A) Submit an affidavit of licensure pursuant to OAR 331-030-0040 demonstrating proof of a current license, which is active with no current or pending disciplinary action, and no disciplinary history for the three years before the date of application for Oregon polysomnographic licensure, as a:

(B) Physician (Doctor of Medicine or Doctor of Osteopathy) licensed under ORS Chapter 677;

(C) Respiratory therapist licensed under ORS chapter 688 with the RPSGT credential from the BRPT; or

(D) CRT or RRT who holds a Sleep Disorder Specialty credential through NBRC;

(E) Submit examination fees;

(F) Submit satisfactory evidence of having passed the Board approved examination listed under OAR 331-712-0010(3) within two years before the date of application; and

(G) Submit licensing fees.

Stat. Auth.: ORS 676.605, 676.615, 688.815 & 688.830

Stats. Implemented: ORS 676.605, 676.615, 688.815 & 688.830

Hist.: HLA 15-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 14-2012, f. 9-12-12, cert. ef. 9-14-12

331-710-0060

Polysomnographic Technologist Temporary-DS (Direct Supervision) Licensure

(1) Provisions of this rule become effective October 15, 2012. A polysomnographic technologist Temporary-DS license authorizes the holder to temporarily practice polysomnography under direct supervision by an approved supervisor.

(2) Direct supervision is supervision of the Temporary-DS licensee by an approved supervisor who is *immediately physically present* with the Temporary-DS licensee while the Temporary-DS licensee is working, and who exercises direction and control over the Temporary-DS licensee's work.

(3) A polysomnographic technologist Temporary-DS license holder must notify the Agency within 10 calendar days of changes in employment status and changes in supervisor.

(4) A polysomnographic technologist Temporary-DS license is valid for six months and may not be renewed.

Stat. Auth.: ORS 676.615, 676.607, 688.819 & 688.830

Stats. Implemented: ORS 676.607, 676.615, 688.800, 688.815, 688.819 & 688.830

Hist.: HLA 14-2012, f. 9-12-12, cert. ef. 9-14-12

331-710-0070

Application Requirements for Polysomnographic Technologist Temporary-DS License

Provisions of this rule become effective October 15, 2012. An applicant for a polysomnographic technologist Temporary-DS license must:

(1) Meet the requirements of OAR chapter 331 division 30;

(2) Submit a completed application form prescribed by the agency, containing the information listed in OAR 331-030-0000 and accompanied by payment of the required application fees;

(3) Submit fingerprint-based national criminal background check pursuant to OAR 331-030-0004;

(4) Be at least 18 years of age, and must provide documentation confirming date of birth, such as a copy of the birth certificate, driver's license, or passport;

(5) Submit current certification in cardiopulmonary resuscitation from an Agency approved provider;

(6) Submit proof of having a high school diploma or equivalent; and

(7) Submit official transcripts defined under OAR 331-705-0050 or documentation approved by the Agency which shows a minimum of proof of successful completion of an Emergency Medical Technician Basic Program, Certified Nursing Assistant Level One Program or A-STEP Introductory Course; OR

(8) Submit official transcripts defined under OAR 331-705-0050 or documentation approved by the Agency which shows proof of successful completion of 80 clocks hours of professional or post-secondary coursework, provided by an in-person or real-time remote instructor, in two or more of the following: Human Anatomy and Physiology, Medical Law and Ethics, Basic Electrocardiogram, Introduction to Health Services, Chemistry for Health Occupations, Health Care Systems, Medifecta Healthcare Training Course, Polysomnographic Technologist Online Audiovisual Content, Basic Allied Health Classes and other courses approved by the agency; AND must

(9) Submit a certificate of completion for the AASM A-STEP Self Study Modules;

(10) Submit information identifying the applicant's approved supervisor pursuant to OAR 331-710-0100, on a form prescribed by the Agency;

(11) Submit appropriate licensing fees.

Stat. Auth.: ORS 676.615, 676.607, 688.819 & 688.830

Stats. Implemented: ORS 676.607, 676.615, 688.800, 688.815, 688.819 & 688.830

Hist.: HLA 14-2012, f. 9-12-12, cert. ef. 9-14-12

331-710-0080

Polysomnographic Technologist Temporary-IS (Indirect Supervision) Licensure

(1) Provisions of this rule become effective October 15, 2012. A polysomnographic technologist Temporary-IS license authorizes the holder to temporarily practice polysomnography under indirect supervision by an approved supervisor, after successfully completing Temporary-DS licensure.

(2) Indirect supervision is supervision of the Temporary-IS licensee by an approved supervisor who is physically present and onsite, but may not be immediately accessible at the sleep facility when the Temporary-IS licensee is working, who reasonably oversees the work of the Temporary-IS licensee, and who is available for questions and assistance when needed.

(3) A polysomnographic technologist Temporary-IS license holder must notify the agency within 10 calendar days of changes in employment status and changes in supervisor.

(4) A polysomnographic technologist Temporary-IS license is valid for one year and may be renewed once.

(5) A Temporary-IS licensee is prohibited from performing services on persons 12 and under.

Stat. Auth.: ORS 676.615, 676.607, 688.819 & 688.830

Stats. Implemented: ORS 676.607, 676.615, 688.800, 688.815, 688.819 & 688.830

Hist.: HLA 14-2012, f. 9-12-12, cert. ef. 9-14-12

331-710-0090**Application Requirements for Polysomnographic Temporary-IS Licensure**

Provisions of this rule become effective October 15, 2012. An applicant for a polysomnographic technologist Temporary-IS license must:

- (1) Meet the requirements of OAR chapter 331 division 30;
- (2) Submit fingerprint-based national criminal background check pursuant to OAR 331-030-0004;
- (3) Submit a completed application form prescribed by the Agency, containing the information listed in OAR 331-030-0000 and accompanied by payment of required fees;
- (4) Submit documentation of qualification through one of the following pathways:

(a) **Temporary License-IS Pathway One: Temporary Licensee-DS:** applying for Temporary-IS licensure must:

(A) Submit documentation of successful completion of 30 sleep tests as a polysomnographic technologist Temporary-DS licensee, which includes the signatures of an approved supervisor and certification by a qualified medical director for polysomnography of successful completion of 30 sleep studies and satisfactory performance;

(B) Submit examination fees;

(C) Complete and pass the Oregon Laws and Rules examination for polysomnography within two years before the date of registration application;

(D) Submit information identifying the applicant's approved supervisor on a form prescribed by the Agency; and

(E) Submit appropriate licensing fees.

(b) **Temporary License-IS Pathway Two: An individual with qualified experience received prior to January 1, 2013,** applying for Temporary-IS licensure must:

(A) Submit form prescribed by the Agency documenting completion of 30 sleep studies within the last six months which were prior to January 1, 2013. The form must be signed by a qualified medical director for polysomnography. The agency may accept up to six months of work experience if received prior to January 1, 2013.

(B) Submit examination fees;

(C) Complete and pass the Oregon Laws and Rules examination for polysomnography within two years before the date of registration application;

(D) Submit information identifying the applicant's approved supervisor on a form prescribed by the Agency; and

(E) Submit appropriate licensing fees.

Stat. Auth.: ORS 676.615, 676.607, 688.819 & 688.830

Stats. Implemented: ORS 676.607, 676.615, 688.800, 688.815, 688.819 & 688.830

Hist.: HLA 14-2012, f. 9-12-12, cert. ef. 9-14-12

331-710-0100**Supervision of a Temporary Polysomnographic Technologist**

(1) Provisions of this rule become effective October 15, 2012. To be approved as a supervisor of a polysomnographic temporary licensee, an individual must:

(a) Hold a valid polysomnographic technologist license under ORS chapter 688 or provide proof of being a "qualified medical director for polysomnography" as defined in ORS 688.800(3);

(b) Have no current or pending disciplinary action imposed by the Agency or other regulatory body; and

(c) Submit proof of having been actively practicing polysomnography for at least three years prior to requesting approval as a supervisor; and

(d) Submit a completed request for approval on a form prescribed by the Agency;

(2) A polysomnography supervisor shall not supervise a temporary licensee until all Agency required documentation has been completed and submitted to the Agency and the supervisor has received Agency approval.

(3) A supervisor may supervise up to four patients per shift; whether they are the supervisor's own patients or patients of temporary DS or IS licensees.

(4) An approved supervisor of a Temporary-DS licensee must be *immediately physically present* with the Temporary-DS licensee while the Temporary-DS licensee is working, and must exercise direction and control over the Temporary-DS licensee's work.

(5) An approved supervisor of a Temporary-IS licensee must be *physically present and onsite, but may not be immediately accessible* at the sleep facility when the Temporary-IS licensee is working, and must reasonably oversee the work of the Temporary-IS licensee, and be available for questions and assistance when needed.

(6) An approved supervisor must notify the Agency in writing within 10 calendar days if a temporary polysomnographic technologist licensee is no longer being supervised, and must provide the number of hours of training completed on a form prescribed by the Agency.

(7) A designated supervisor must exercise management, guidance, and control over the activities of the temporary polysomnographic technologist and must exercise professional judgment and be responsible for all matters related to the polysomnography.

(8) Approval of a temporary polysomnographic technologist's work experience under OAR 331-710-0110 must be documented by the handwritten signature of the approved supervisor, the supervisor's license number, and date of supervisor's review, placed beside the temporary polysomnographic technologist's signature, on a form prescribed by the agency.

(9) An approved supervisor's Agency approval may be withdrawn if the supervisor provides incomplete or inadequate training during supervision or falsifies documentation.

NOTE: This rule is not intended for or required of purely administrative supervisors.

Stat. Auth.: ORS 676.615, 676.607, 688.819 & 688.830

Stats. Implemented: ORS 676.607, 676.615, 688.800, 688.815, 688.819 & 688.830

Hist.: HLA 14-2012, f. 9-12-12, cert. ef. 9-14-12

331-710-0110**Work Experience Requirements for Polysomnography**

(1) Provisions of this rule become effective October 15, 2012. Work experience for polysomnography applicants must involve all of the following:

(a) Patient interaction & professional behavior;

(b) Patient assessment;

(c) Polysomnography theory;

(d) Performing polysomnography preparation and setup;

(e) Performing polysomnography recording and monitoring;

(f) Scoring sleep studies;

(g) Artifacts, and arrhythmias;

(h) Sleep related breathing disorders;

(i) Positive airway pressure and oxygen;

(j) Evaluation of sleepiness;

(k) Movement disorders: disorders involving arousal and seizures;

(l) Scoring waveforms;

(m) Scoring sleep stages;

(n) Scoring respiratory events;

(o) Scoring arousals, electroencephalography abnormalities, movements and cardiac events;

(p) Sleep deprivation;

(q) Insomnia;

(r) Medications and sleep;

(s) Circadian sleep and shift work

(t) Arrhythmia recognition;

(u) Emergency procedures and care;

(v) Patient education and mask fitting;

(w) Pediatric sleep; and

(2) For the purpose of this rule "Artifact" means an extraneous electrical signal in a recording channel on a polysomnograph, which originates from the patient, equipment, or external sources, and which may mask or interfere with the desired signal (E.g., snores that appear on the EEG channel, pulses of hypertensive patients that appear on the chin EMG channel, etc.).

NOTE: A Temporary-IS licensee is prohibited from performing services on persons 12 and under. See OAR 331-710-0080.

Stat. Auth.: ORS 676.615, 676.607, 688.819 & 688.830

Stats. Implemented: ORS 676.607, 676.615, 688.800, 688.815, 688.819 & 688.830

Hist.: HLA 14-2012, f. 9-12-12, cert. ef. 9-14-12

DIVISION 712

**RESPIRATORY THERAPIST AND
POLYSOMNOGRAPHIC TECHNOLOGISTS LICENSING
BOARD — EXAMINATIONS**

331-712-0000

Respiratory Care Approved Examination

The Board has selected the CRT or RRT examination administered by the NBRC as its minimal qualifying examination for licensure. Individual applicants are responsible for payment of all NBRC application, examination, national certification or other fees directly to NBRC.

NOTE: An applicant is responsible for direct payment to the NBRC of all application, examination, national certification or other fees associated with the NBRC.

Stat. Auth.: ORS 676.607, 676.615, 688.830, OL 2011, Ch. 715

Stats. Implemented: ORS 676.606, ORS 676.607, ORS 676.612, 676.615, 676.625, 688.815 & 688.830, 688.834, 688.836, OL 2011, Ch. 715

Hist.: HLA 15-2011, f. 12-30-11, cert. ef. 1-1-12

331-712-0010

Polysomnography Approved Examinations

The Board has approved the following examinations for qualification as a licensed polysomnographic technologist:

(1) The RPSGT "registration examination" administered by the BRPT;

(2) The SDS examination administered by the NBRC; and

(3) The Oregon Laws and Rules examination for polysomnography administered by the Agency.

NOTE: An applicant is responsible for direct payment to the organization of all application, examination, national certification or other fees associated with any examination.

Stat. Auth.: ORS 676.607, 676.615, 688.830 & 2011 OL Ch. 715

Stats. Implemented: ORS 676.606, ORS 676.607, ORS 676.612, 676.615, 676.625, 688.815 & 688.830, 688.834, 688.836 & 2011 OL Ch. 715

Hist.: HLA 15-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 14-2012, f. 9-12-12, cert. ef. 9-14-12

331-712-0020

General Examination Information

(1) To be eligible for examination administered by the Agency, an applicant must meet identification requirements listed under OAR 331-030-0000.

(2) The examination is administered in English only, unless an Agency approved testing contractor or vendor provides the examination in languages other than English.

(3) Examination candidates may be electronically monitored during the course of testing.

(4) Examination candidates must adhere to the maximum time allowance for each section of the examination, as established by the Board.

(5) Notes, notetaking, textbooks, notebooks, electronic equipment and communication devices, such as personal computers, pagers and cellular telephones or any other devices deemed inappropriate by the Agency, are prohibited in the examination area.

(6) Candidate conduct that interferes with the examination may result in the candidate's disqualification during or after the examination, the candidate's examination being deemed invalid, and forfeiture of the candidate's examination fees. Such conduct includes but is not limited to:

(a) Directly or indirectly giving, receiving, soliciting, attempting to give, receive or solicit aid during the examination process;

(b) Violations of subsections (1), (5), or (6) of this rule;

(c) Removing or attempting to remove any examination-related information, notes or materials from the examination site;

(d) Failing to follow directions relative to the conduct of the examination; and

(e) Exhibiting behavior that impedes the normal progress of the examination.

(7) If the candidate is disqualified from taking the examination or the candidate's examination is deemed invalid for reasons under subsection (6) of this rule, the candidate may be required to reapply, submit additional examination fees, and request in writing to schedule a new examination date, before being considered for another examination opportunity.

Stat. Auth.: ORS 676.607, 676.615, 688.830, OL 2011, Ch. 715

Stats. Implemented: ORS 676.606, ORS 676.607, ORS 676.612, 676.615, 676.625, 688.815 & 688.830, 688.834, 688.836, OL 2011, Ch. 715

Hist.: HLA 15-2011, f. 12-30-11, cert. ef. 1-1-12

DIVISION 715

**RESPIRATORY THERAPIST AND
POLYSOMNOGRAPHIC TECHNOLOGISTS
LICENSING BOARD — LICENSURE; RENEWAL**

331-715-0000

License Display and Posting Requirements

(1) A licensee must show proof of valid license with the agency upon request or post the license document in public view at the licensee's primary workplace.

(2) A licensee may temporarily conceal the address printed on the license document with a covering that is removable.

(3) A licensee must carry the license identification card (pocket card) with them, or post in plain view, the official license anytime services are being provided.

Stat. Auth.: ORS 676.605, 676.615 & 688.830

Stats. Implemented: ORS 676.605, 676.615 & 688.830

Hist.: HDLB 1-1997(Temp), f. 12-19-97, cert. ef. 12-22-97 thru 6-19-98; HDLP 1-1998(Temp), f. & cert. ef. 3-20-98 thru 4-1-98; HDLP 2-1998, f. & cert. ef. 6-15-98; HDLP 2-2001, f. & cert. ef. 5-1-01; HDLP 3-2001, f. 6-29-01, cert. ef. 7-1-01; HLO 4-2004, f. 6-29-04, cert. ef. 7-1-04; HLA 7-2010, f. & cert. ef. 11-1-10

331-715-0010

License Renewal

(1) A licensee is subject to the provisions of OAR Chapter 331, division 30 regarding the renewal of a license, and provisions regarding authorization to practice, identification, and requirements for issuance of a duplicate license.

(2) License renewal under this rule is valid for one year.

(3) **LICENSE RENEWAL:** To avoid delinquency penalties, license renewal must be made prior to the licensee entering inactive status. The licensee must submit the following:

(a) Renewal application form;

(b) Payment of required renewal fee pursuant to OAR 331-705-0060;

(c) Attestation of having obtained required biannual continuing education under OAR 331-720-0010 or 331-720-0015, on a form prescribed by the Agency, whether license is current or inactive; and

(d) Information, on a form prescribed by the Agency, permitting the Agency to perform a state criminal background check pursuant to OAR 331-030-0004;

(4) **INACTIVE LICENSE RENEWAL:** A license may be inactive for up to three years. A licensee who is inactive is not authorized to practice. When renewing after entering inactive status, the licensee must submit the following:

(a) Renewal application form;

(b) Payment of delinquency and license fees pursuant to OAR 331-705-0060;

(c) Attestation of having obtained required biannual continuing education under OAR 331-720-0010 or 331-720-0015, on a form prescribed by the Agency, whether license is current or inactive;

(d) Information, on a form prescribed by the Agency, permitting the Agency to perform a state criminal background check pursuant to OAR 331-030-0004;

(5) **EXPIRED LICENSE:** A license that has been inactive for more than three years is expired and the licensee must reapply for licensure and meet the requirements listed in OAR 331-710-0010 or 331-710-0050.

(6) A licensee failing to meet continuing education requirements listed under OAR 331-720-0010 or 331-720-0015 is considered to have an expired license and must reapply and meet requirements pursuant to OAR 331-710-0010 or 331-710-0050.

Stat. Auth.: ORS 676.605, 676.615 & 688.830

Stats. Implemented: ORS 676.605, 676.615 & 688.830

Hist.: HDLB 1-1997(Temp), f. 12-19-97, cert. ef. 12-22-97 thru 6-19-98; HDLP 1-1998(Temp), f. & cert. ef. 3-20-98 thru 4-1-98; HDLP 2-1998, f. & cert. ef. 6-15-98; HLO 4-2004, f. 6-29-04, cert. ef. 7-1-04; HLO 10-2004(Temp), f. & cert. ef. 11-8-04 thru 3-31-05; HLO 1-2005, f. 2-28-05 cert. ef. 3-1-05; HLA 7-2010, f. & cert. ef. 11-1-10; HLA 15-2011, f. 12-30-11, cert. ef. 1-1-12

DIVISION 718

**RESPIRATORY THERAPIST AND
POLYSOMNOGRAPHIC TECHNOLOGISTS LICENSING
BOARD — STANDARDS OF PRACTICE**

331-718-0000**Standards of Practice for Respiratory Care**

(1) A licensee must comply with the prevailing community standards for professional conduct. The Board recognizes and adopts the American Association of Respiratory Care (AARC) Statement of Ethics and Professional Conduct effective March 2000 as its professional standards model. Documents are available on the AARC Website at <http://www.aarc.org/>.

(2) At minimum, licensees are subject to directives and policies established by the medical facilities, businesses or agencies by which they are employed or regulated.

(3) A licensee must comply with the following safety and infection control requirements:

(a) All devices or items that come into direct contact with a client must be cleaned, sanitized or disinfected according to the manufacturer's instructions or Centers for Disease Control and Prevention (CDC) Standard Precautions;

(b) All items that come in direct contact with the client's skin that do not require disinfecting must be clean;

(c) All items that come in direct contact with the client's skin that cannot be cleaned or disinfected must be disposed of in a covered waste receptacle immediately after use;

(d) All disinfecting solutions and agents must be kept at adequate strengths to maintain effectiveness, be free of foreign material and be available for immediate use at all times unless equipment is prepackaged and pre-sterilized;

(e) All high-level and low-level disinfecting agents must be EPA registered. High-level disinfectant means a chemical agent which has demonstrated tuberculocidal activity. Low-level disinfectant means a chemical agent which has demonstrated bactericidal, germicidal, fungicidal and limited virucidal activity;

(f) Before use, disposable prepackaged products and sterilized reusable instruments must be stored in clean, sterilized containers that can be closed between treatments to maintain effective sterilization of the instrument until removed from the container.

(4) A licensee must observe and follow the Standard Precautions adopted by the CDC as defined in OAR 437 division 2, subdivision Z, and the CDC Standard Precautions for public service workers regarding personal protection equipment and disposal of blood or bodily fluid contaminated articles, tools and equipment when providing services to patients.

Stat. Auth.: ORS 676.607, 676.615, 688.830, OL 2011, Ch. 715

Stats. Implemented: ORS 676.606, 676.607, 676.612, 676.615, 676.625, 688.815 & 688.830, 688.834, 688.836, OL 2011, Ch. 715

Hist.: HLA 15-2011, f. 12-30-11, cert. ef. 1-1-12

331-718-0010**Pharmacological Agents for Respiratory Care**

(1) A licensee administering intravenous narcotics, paralytics and opioids under ORS 688.800(3)(a) is prohibited from monitoring the patient and must have another qualified licensed individual present to monitor the patient throughout procedures with intravenous narcotics, paralytics and opioids.

(2) All policies, procedures and protocols for respiratory therapists related to administration of intravenous pharmacological agents must be made available to the Agency if requested.

Stat. Auth.: ORS 676.607, 676.615, 688.830, OL 2011, Ch. 715

Stats. Implemented: ORS 676.606, 676.607, 676.612, 676.615, 676.625, 688.815 & 688.830, 688.834, 688.836, OL 2011, Ch. 715

Hist.: HLA 15-2011, f. 12-30-11, cert. ef. 1-1-12

331-718-0020**Standards of Practice for Polysomnography**

(1) A licensee must comply with the prevailing community standards for professional conduct. The Board recognizes and adopts the BRPT Standards of Conduct as its professional standards model. Documents are available on the BRPT Website at <http://www.brpt.org>.

(2) At minimum, licensees are subject to directives and policies established by the medical facilities, businesses or agencies by which they are employed or regulated.

(3) A licensee must comply with the following safety and infection control requirements:

(a) All devices or items that come into direct contact with a client must be cleaned or disinfected according to the manufacturer's instructions or Centers for Disease Control and Prevention (CDC) Standard Precautions;

(b) All items that come in direct contact with the client's skin that do not require disinfecting must be clean;

(c) All items that come in direct contact with the client's skin that cannot be cleaned or disinfected must be disposed of in a covered waste receptacle immediately after use;

(d) All disinfecting solutions and agents must be kept at adequate strengths to maintain effectiveness, be free of foreign material and be available for immediate use at all times unless equipment is prepackaged, pre-sterilized and within the expiration date listed on the label of the disinfecting solution;

(e) All high-level and low-level disinfecting agents must be EPA registered. High-level disinfectant means a chemical agent which has demonstrated tuberculocidal activity. Low-level disinfectant means a chemical agent which has demonstrated bactericidal, germicidal, fungicidal and limited virucidal activity;

(f) Before use, disposable prepackaged products and sterilized reusable instruments must be stored in clean containers that can be closed between use to maintain effective cleanliness until removed from the container.

(g) Masks must be disinfected before each use on a client by removing foreign and completely saturating the mask with a high level disinfectant solution, spray or foam used to manufacturer's instructions.

(4) A licensee must observe and follow the Standard Precautions adopted by the CDC as defined in OAR 437 division 2, subdivision Z, and the CDC Standard Precautions for public service workers regarding personal protection equipment and disposal of blood or bodily fluid contaminated articles, tools and equipment when providing services to patients.

Stat. Auth.: ORS 676.605, 676.615 & 688.830

Stats. Implemented: ORS 676.605, 676.615 & 688.830

Hist.: HLA 15-2011, f. 12-30-11, cert. ef. 1-1-12

DIVISION 720

**RESPIRATORY THERAPIST AND
POLYSOMNOGRAPHIC TECHNOLOGISTS LICENSING
BOARD — CONTINUING EDUCATION**

331-720-0010**Continuing Education Requirements for Respiratory Care**

(1) A licensee is required to complete 15 hours of Board approved continuing education every two years. At least two-thirds of the required continuing education hours must be related to clinical practice of respiratory care.

(2) To renew the license, evidence of required continuing education must be provided at the time of renewal by means of a prescribed self-attestation statement certifying participation in approved continuing education. To ensure that adequate proof of attainment of required continuing education is available for audit or investigation by the Agency, the licensee must maintain a record of attendance for two years following the two-year continuing education cycle and renewal of the license.

(3) Continuing education is acceptable if provided by:

(a) A medical organization or association accredited by the Oregon Medical Association, the Oregon Osteopathic Association, the American Medical Association Continuing Medical Education, the American Osteopathic Association, the American Nurses Association, the American Association for Respiratory Care, or its affiliates, to provide continuing education to physicians, nurses, or respiratory therapists;

(b) A hospital not accredited to provide continuing education but the continuing education provided meets the following requirements:

(A) The content of the course or program must be relevant to the scope of practice of respiratory care as defined in ORS 688.800(7);

(B) The faculty must be knowledgeable in the subject matter as evidenced by a degree from an accredited college or university and verifiable experience in the subject matter or teaching and clinical experience in the same or similar subject matter;

(C) Educational objectives must be listed;

(D) The teaching methods must be described, e.g., lecture, seminar, audiovisual, simulation;

(E) Evaluation methods must document that the objectives have been met.

(c) An institution of higher education accredited by the Northwest Association of Secondary and Higher Schools or its successor, or the State Board of Higher Education, providing the course(s) meet the requirements of paragraph (a) of this subsection. Five hours of continuing education credit per course, and up to two-thirds of the continuing education requirement, can be obtained by successfully completing the course(s) with a grade "C" or above, or a "pass" for a pass/fail course;

(d) A respiratory care educational program accredited by the American Medical Association Committee on Allied Health Education and Accreditation in collaboration with the Committee On Accreditation for Respiratory Care, or its successor, or the Commission on Accreditation for Allied Health Education Programs offering an Associate Degree in Respiratory Care;

(e) The NBRC through passing the examination for initial certification as a RRT, or Perinatal/Pediatric Respiratory Care Specialist (PPRCS), or the NBRC through passing the re-credentialing examination for a CRT, RRT, or PPRCS. Fifteen hours of continuing education can be obtained by passing these certification and re-credentialing examinations;

(f) The NBRC through passing the examination for initial certification as a Certified Pulmonary Function Technician (CPFT), or Registered Pulmonary Function Technician (RPFT). Seven and one-half hours of continuing education can be obtained by passing these certification examinations;

(g) Publication in a peer reviewed journal as the author or co-author of a clinical paper or abstract. A total of five credit hours will be accepted per biennium for the publication of articles or abstracts in professional journals;

(h) An established and approved organization conducting humanitarian activities in another state or country, that is providing respiratory care services as defined in ORS 688.800(7) under its auspices. The organization and services are subject to Board approval on a case-by-case basis for continuing education credit.

(4) A licensee who instructs continuing education courses may obtain the same number of continuing education hours for each initial course taught during the two-year continuing education cycle, in which the course is initially presented, as granted to course participants.

(5) A licensee is awarded continuing education credit once for completion of the initial certification course for Cardiac Life Support (ACLS), Pediatric Advanced Life Support (PALS) courses, and Neonatal Resuscitation Program (NRP). Up to four hours of continuing education credit may be obtained for each re-certification in ACLS, PALS, or NRP courses.

(6) Continuing education credit will not be granted for completion of the Basic Life Support (BLS) course.

(7) A licensee who does not meet continuing education requirements must reapply and meet requirements for licensure according to OAR 331-710-0010 at the time of application.

Stat. Auth.: ORS 676.605, 676.615 & 688.830

Stats. Implemented: ORS 676.605, 676.615 & 688.830

Hist.: HDLB 1-1997(Temp), f. 12-19-97, cert. ef. 12-22-97 thru 6-19-98; HDLP 2-1998, f. & cert. ef. 6-15-98; HLO 4-2004, f. 6-29-04, cert. ef. 7-1-04; HLO 10-2004(Temp), f. & cert. ef. 11-8-04 thru 3-31-05; HLO 1-2005, f. 2-28-05 cert. ef. 3-1-05; HLA 7-2010, f. & cert. ef. 11-1-10; HLA 15-2011, f. 12-30-11, cert. ef. 1-1-12

331-720-0015

Continuing Education Requirements for Polysomnography

(1) A licensee is required to complete 15 hours of Board approved continuing education every two years, related to clinical practice of polysomnography.

(2) To renew the license, evidence of required continuing education must be provided at the time of renewal by means of a prescribed self-attestation statement certifying participation in approved continuing education. To ensure that adequate proof of attainment of required continuing education is available for audit or investigation by the Agency, the licensee must maintain a record of attendance for two years following the two-year continuing education cycle and renewal of the license.

(3) Continuing education is acceptable if provided by:

(a) A medical organization or association accredited by the Board of Registered Polysomnographic Technicians, Oregon Medical Association, the Oregon Osteopathic Association, the American Medical Association Continuing Medical Education, the American Osteopathic Association, the American Nurses Association, the American Association for Respiratory Care, American Association of Sleep Technologists and its affiliates, to provide continuing education to physicians, nurses, respiratory therapists or polysomnographic technologists and other organizations approved by the Agency;

(b) A hospital not accredited to provide continuing education but the continuing education provided meets the following requirements:

(A) The content of the course or program must be relevant to the scope of practice of polysomnography as defined in ORS 688.800(2);

(B) The faculty must be knowledgeable in the subject matter as evidenced by a degree from an accredited college or university and verifiable experience in the subject matter or teaching and clinical experience in the same or similar subject matter;

(C) Educational objectives must be listed;

(D) The teaching methods must be described, e.g., lecture, seminar, audiovisual, simulation;

(E) Evaluation methods must document that the objectives have been met.

(c) An institution of higher education accredited by the Northwest Association of Secondary and Higher Schools or its successor, or the State Board of Higher Education, providing the course(s) meet the requirements of paragraph (a) of this subsection. Five hours of continuing education credit per course, and up to two-thirds of the continuing education requirement, can be obtained by successfully completing the course(s) with a grade "C" or above, or a "pass" for a pass/fail course;

(d) A polysomnography educational program accredited by the American Medical Association Committee on Allied Health Education and Accreditation in collaboration with the Committee On Accreditation for Respiratory Care, or its successor, or the Commission on Accreditation for Allied Health Education Programs offering an Associate Degree in Polysomnography;

(e) An established and approved organization conducting humanitarian activities in another state or country, that is providing polysomnography services as defined in ORS 688.800(2) under its auspices. The organization and services are subject to Board approval on a case-by-case basis for continuing education credit.

(4) A licensee who instructs continuing education courses may obtain the same number of continuing education hours for each initial course taught during the two-year continuing education cycle, in which the course is initially presented, as granted to course participants.

(5) Continuing education credit will not be granted for completion of the Basic Life Support (BLS) course.

(6) A licensee who does not meet continuing education requirements must reapply and meet requirements for licensure according to OAR 331-710-0050 at the time of application.

Stat. Auth.: ORS 676.605, 676.615 & 688.830

Stats. Implemented: ORS 676.605, 676.615 & 688.830

Hist.: HLA 15-2011, f. 12-30-11, cert. ef. 1-1-12

331-720-0020

Continuing Education: Audit, Required Documentation and Sanctions

(1) The Oregon Health Licensing Agency will audit a select percentage of licenses determined by the Board to verify compliance with continuing education requirements.

(2) If selected for audit the licensee must provide documentation within 30 days to substantiate they have obtained the required continuing education. Documentation must include:

(a) Certificate of completion, official transcript, statement or affidavit from the sponsor attesting to attendance or other documentation approved by the agency.

- (b) Name of sponsoring institution/association or organization;
- (c) Title of presentation and description of content;
- (d) Name of instructor or presenter;
- (e) Date of attendance and duration in hours; and
- (f) Course agenda.

(3) If documentation of continuing education is incomplete, the licensee has 30 calendar days from the date of notice to submit further documentation to substantiate having completed the required continuing education.

(4) Failure to meet continuing education requirements shall constitute grounds for disciplinary action which may include but is not limited to assessment of a civil penalty, suspension, refusal to renew or revocation of the license.

Stat. Auth.: ORS 676.605, 676.615 & 688.830

Stats. Implemented: ORS 676.605, 676.615 & 688.830

Hist.: HDLB 1-1997(Temp), f. 12-19-97, cert. ef. 12-22-97 thru 6-19-98; HDLP 2-1998, f. & cert. ef. 6-15-98; HLO 4-2004, f. 6-29-04, cert. ef. 7-1-04; HLA 7-2010, f. & cert. ef. 11-1-10

DIVISION 740

RESPIRATORY THERAPIST AND POLYSOMNOGRAPHIC TECHNOLOGISTS LICENSING BOARD — FEES

331-740-0000

Fees

(1) An applicant or licensee are subject to the provisions of OAR 331-010-0010 and 331-010-0020 regarding the payment of fees, penalties and charges.

(2) Fees established by the Oregon Health Licensing Agency pursuant to ORS 676.607 are as follows:

- (a) Application:
- (A) License: \$50.
- (B) Temporary license: \$50.
- (b) Examination — Oregon laws & rules: \$50.
- (c) Original issuance of authorization to practice:
- (A) License: \$50.
- (B) Temporary license: \$50.
- (C) Temporary six month license: \$50
- (d) Renewals:
- (A) Licenses: \$50.
- (B) Online license: \$45
- (C) Temporary license: \$50

(e) Delinquent (late) renewal of license: \$50 for each year in inactive status up to three years.

(f) Replacement of license, including name change: \$25.

(g) Duplicate license document: \$25 per copy with maximum of three.

(h) Affidavit of licensure for reciprocity: \$50.

(i) Information packets: \$10

(j) An additional \$25 administrative processing fee will be assessed if a NSF or non-negotiable instrument is received for payment of fees, penalties and charges. Refer to OAR 331-010-0010.

Stat. Auth.: ORS 676.607, 676.615, 688.830, OL 2011, Ch. 715

Stats. Implemented: ORS 676.606, 676.607, 676.612, 676.615, 676.625, 688.815 & 688.830, 688.834, 688.836, OL 2011, Ch. 715

Hist.: HLA 15-2011, f. 12-30-11, cert. ef. 1-1-12

SEX OFFENDER TREATMENT BOARD RULES

DIVISION 800

GENERAL ADMINISTRATION

331-800-0010

Definitions

The following definitions apply to OAR 331-800-0010 to 331-850-0010:

(1) “Active certificate” means a certificate issued when all requirements are met, fees paid and certificate is not expired, suspended or revoked.

(2) “Affidavit of Licensure” means an original document verifying licensing history and status, including information disclosing all unresolved or outstanding penalties and/or disciplinary actions. The document is issued and signed by the regulatory authority in the state which issued the license with an official seal or stamp affixed to the document; it is not the certificate or license form issued which authorizes the holder to practice. Refer to OAR 331-030-0040

(3) “Agency” means the Oregon Health Licensing Agency (OHLA). The agency is responsible for the budget, personnel, performance-based outcomes, consumer protection, fee collection, mediation, complaint resolution, discipline, rule making, and record keeping.

(4) “Authorization” means the official document, the certificate, issued by the Oregon Health Licensing Agency.

(5) “Board” means pursuant to ORS 675.395, the entity that advises the agency in matters relating to the practice of sex offender treatment, including practice standards, education and training requirements, and advises the agency on all disciplinary issues in accordance with 676.612. The Oregon Health Licensing Agency Director controls the regulatory operations and has decision-making authority on all substantive matters.

(6) “Certified clinical sex offender therapist” means a person who is certified by the agency to provide services for the treatment and rehabilitation of sex offenders and who may supervise certified associate sex offender therapist; also referred to as “clinical therapist”.

(7) “Certified associate sex offender therapist” means a person who is certified by the agency to provide services for the treatment and rehabilitation of sex offenders while under the direct supervision of a certified clinical sex offender therapist; also referred to as “associate therapist”.

(8) “Continuing education hours” means the actual academic classroom or course work time, including but not limited to workshops, symposiums, seminars, excluding personal travel time to and from the training site, registration or check-in periods breaks or lunch periods.

(9) “Credential” or its derivative means the process of licensing, registration, certification or the equivalent through which a person is legally recognized by a state agency as lawfully authorized to practice a health profession.

(10) “Direct supervision” means a minimum of two hours of supervision by a certified clinical sex offender therapist for each 45 hours of direct clinical contact with a sex offender as specified in ORS 675.365(4).

(11) “Direct treatment services” means face-to-face individual, group or family therapy, provided by a clinical or associate therapist, to a client.

(12) “Director” means, pursuant to ORS Chapter 676.610, the individual who has sole responsibility for the administrative, fiscal, human resource and regulatory functions of the agency.

(13) “Ethical” means conforming to professional standards, as adopted by the Association for the Treatment of Sexual Abusers’ Practice Standards (ATSA) and Guidelines adopted in 2005, and Professional Code of Ethics adopted in 2001, regarding professional practices authorized under ORS 675.360 to 675.410 and rules adopted by the agency.

(14) “Evaluation” means a comprehensive psychosexual assessment or intake assessment conforming to professional standards as adopted by the Association for Treatment of Sexual Abusers’ Practice Standards and Guidelines adopted in 2005, to determine a client’s risk to re-offend, identify dynamic risk factors, and develop appropriate treatment and supervision plans. Evaluation includes a written report including, but not limited to the following:

(a) Useful guidance to others, such as the courts, in making decisions affecting a client’s future and whether the client’s risk can be managed in a community setting;

(b) Comprehensive description of the client’s abusive and non-abusive sexual behavior;

(c) Amenability to treatment;

(d) Recommendations regarding the intensity and type of intervention that is required;

(e) Risk management strategies;

(f) Responsiveness to treatment, such as culture, ethnicity, age, IQ, learning style, neuropsychological disorders, personality style, mental and physical disabilities, medication, and motivation.

(15) "Health care information" means any information, whether oral or recorded in any form or medium that identifies or can readily be associated with the identity of, and relates to the health care of, a patient or client.

(16) "Informed consent" means consent obtained following a thorough and easily understood explanation to the client, or the client's guardian, of the proposed treatment plan, any available alternative procedures and any risks associated with the proposed plan. The therapist provides clients with information about the purpose, goals, techniques, procedures, limitations, and consequences of not consenting, the limits of confidentiality, and alternatives to the services offered, potential risks and benefits of services to be performed. Supervisors ascertain the client's ability to understand and utilize the information.

(17) "Functionally disabled" means a severe and chronic disability that is attributable to a mental or physical impairment or a combination of physical and mental impairments which result in substantial functional limitations in three or more of the major life activities.

(18) "Mental health professional" means a person licensed to practice without supervision in the state of Oregon as a physician, psychiatrist, psychiatric nurse practitioner, psychologist, psychological associate, licensed professional counselor, licensed clinical social worker, or licensed marriage and family therapist, who provides sex offender treatment of adults, juveniles or functionally disabled individuals.

(19) "Official transcript" means an original document certified by an accredited educational institution, delivered from the school to the agency by mail or courier, which includes:

- (a) School name and location;
- (b) Student's name, address and date of birth;
- (c) Enrollment and termination dates;
- (d) Hours and types of course work;
- (e) Degree issued;
- (f) School seal or stamp;
- (g) Signature of authorized school representative or registrar.

(20) "Oregon Health Licensing Agency" (OHLA) means the agency assigned to carry out the administrative, programmatic and daily operations, and regulatory functions of ORS 676.606.

(21) "Professional mental health licensing or certification agency" means the entity charged with the administrative functions and responsibilities for protecting the public through the licensing and regulating of certain professions practiced in Oregon, or in a county, other state, country or territory. The entity has the responsibility for decisions on qualifications, standards of practice, licensing, discipline and other discretionary functions relating to professional activities in the professional licensing boards, councils, or programs; also known as regulatory authority.

(22) "Reciprocity" means, according to ORS 675.380, certification, registration or licensure in another state based on standards of training, education and experience that are similar to those required for certification in Oregon as a certified clinical sex offender therapist or a certified associate sex offender therapist as specified in 675.375.

(23) "Sex offender specific treatment" means treatment modalities that are based on empirical research with regard to favorable treatment outcomes and are professionally accepted in the field of sex offender treatment of adults, juveniles, and functionally disabled individuals, with sexual behavior problems. Offense specific treatment is a comprehensive set of planned treatment experiences and interventions that modify sexually deviant thoughts, fantasies, and behaviors and that utilize specific strategies to promote change and to reduce the chance of re-offending.

(24) "Treatment plan" means an individualized written statement of intended care and services as documented in the evaluation that details how the client's treatment needs will be met while protecting the community during the course of treatment.

Stat. Auth.: ORS 675.410 & 676.615

Stat. Implemented: ORS 675.360 - 675.410

Hist.: HLA 1-2008(Temp), f. 3-14-08, cert. ef. 3-15-08 thru 9-1-08; HLA 2-2008, f. 5-27-08, cert. ef. 6-1-08; HLA 2-2010, f. & cert. ef. 3-15-10; HLA 4-2010, f. & cert. ef. 5-18-10

331-800-0020

Fees

Fees established by the Oregon Health Licensing Agency are as follows:

- (1) Application for certification: \$75.
- (3) Original two year certification: \$650.
- (4) Application for renewal — two year certificate: \$650.
- (5) Replacement certificate, including name change: \$25.
- (6) Duplicate certificate document: \$25 per copy with a maximum of three.
- (7) Delinquency fee: \$50 for each year in expired status up to two years.
- (8) Examination — Oregon laws & rules: \$50.
- (9) Affidavit of licensure: \$50.
- (10) An additional \$25 administrative processing fee will be assessed if a NSF or non-negotiable instrument is received for payment of fees, penalties and charges. Refer to OAR 331-010-0010.

Stat. Auth.: ORS 675.405, 675.410 & 676.625

Stat. Implemented: ORS 675.405

Hist.: HLA 1-2008(Temp), f. 3-14-08, cert. ef. 3-15-08 thru 9-1-08; HLA 2-2008, f. 5-27-08, cert. ef. 6-1-08; HLA 8-2008, f. 9-15-08, cert. ef. 10-1-08; HLA 2-2010, f. & cert. ef. 3-15-10; HLA 4-2010, f. & cert. ef. 5-18-10

DIVISION 810

QUALIFICATIONS AND TRAINING

331-810-0020

Clinical Sex Offender Therapist Requirements

To qualify for certification as a clinical sex offender therapist, an applicant shall provide satisfactory evidence to the agency that requirements of ORS 675.375(3) have been met regarding education, training, and experience in the evaluation, treatment, and management of individuals who sexually offend, in addition to other requirements specified in this rule. Required documentation includes the following:

(1) The applicant shall arrange for Affidavit of Licensure as defined in OAR 331-030-0040 be provided to the Agency. The applicant is responsible for payment of any service fee the originating agency may assess for producing the affidavit.

(2) Record of at least 2,000 hours of professional clinical experience, of which 1,000 hours relates to providing direct treatment services as defined in OAR 331-800-0010, within a period of not less than three nor more than six years immediately preceding the date of application.

(3) Record of 500 hours of evaluations as defined in OAR 331-800-0010, that includes but is not limited to the following types of professional activities:

- (a) Evaluation experience credit:

(A) Primary or secondary responsibility for interviewing the client;

(B) Preparation of the written evaluation report;

(C) All contact with clients; and

(D) Preparation of limited assessments for the purpose of:

- (i) Institution classification;
- (ii) Treatment monitoring; and
- (iii) Reporting.

- (b) Treatment experience credit:

(A) Face-to-face treatment hours performed by affiliates under the supervision of certified therapists;

(B) Time spent as a co-therapist. Both therapists shall have formal responsibility for the group session; and

(C) Time spent maintaining collateral contacts and written case/progress notes.

(4) Record of 500 hours of professionally related activities, associated with the following type of work:

(a) At least 340 hours of documented activities, including but not limited to:

(A) Client charting or case management;

(B) Research;

(C) Peer review, consultations, or meetings with attorneys, parole officers or other officials;

(D) Court time or testimony;

(E) Profession related committee work or attendance at sex offender treatment related meetings; and

(b) At least 160 hours of professional activities engaged in as a sex offender therapist, while under the direct supervision of a qualified mental health professional; refer to OAR 331-810-0050.

(5) Record of 60 hours of formal training directly related to the treatment and evaluation of sex offenders or victims of abuse that was completed within the last three years immediately preceding the date of application.

(a) Completion of formal training shall include documenting 45 hours of the total required hours, in the following essential subjects:

- (A) Assessment and diagnosis;
- (B) Cognitive therapy;
- (C) Counseling and psychotherapy;
- (D) Cultural/ethnic issues;
- (E) Ethics applicable to working with a forensic population;
- (F) Human development with special attention to sexual development and healthy sexuality;
- (G) Interviewing skills;
- (H) Knowledge of family dynamics as related to sex offending;
- (I) Psychometric and psycho-physiological testing;
- (J) Psychopathology;
- (K) Relapse prevention;
- (L) Relationship and social skills training;
- (M) Risk assessment;
- (N) Sexual arousal control;
- (O) Social support networks;
- (P) Victim awareness and empathy.

(b) Completion of formal training shall include documenting 15 hours of the total required hours, in the following areas of training and knowledge:

- (A) Supervision;
- (B) Assessment and treatment of mental illness including neuropsychological disorders;
- (C) Couples and family therapy;
- (D) Family reunification;
- (E) Pharmacological therapy;
- (F) Substance abuse treatment.

Stat. Auth.: ORS 675.375, 675.400 & 676.615

Stat. Implemented: ORS 675.375 & 675.400

Hist.: HLA 1-2008(Temp), f. 3-14-08, cert. ef. 3-15-08 thru 9-1-08; HLA 2-2008, f. 5-27-08, cert. ef. 6-1-08; HLA 2-2010, f. & cert. ef. 3-15-10; HLA 4-2010, f. & cert. ef. 5-18-10

331-810-0030

Associate Sex Offender Therapist Requirements

To qualify for certification as an associate sex offender therapist, an applicant shall provide satisfactory evidence to the agency that requirements of ORS 675.375(4) have been met regarding education, training and experience, in addition to other requirements listed in this rule. Required documentation includes the following:

(1) Official transcripts from college, university and post graduate records, showing attainment of at least a Bachelors of Science degree in the mental health field;

(2) Record of at least 1,000 hours of professional experience related to direct treatment services, as defined in OAR 331-800-0010, completed within three years preceding the date of application. Documentation shall include the number of hours involved in the following:

- (a) Direct client contact;
- (b) Review of treatment plans and provision of direct treatment services under supervision;
- (c) Charting or case management;
- (d) Research;
- (e) Peer review, consultation, or meetings with attorneys, parole officers, or other officials;
- (f) Court time or testimony;
- (g) Profession related committee work or attendance at sex offender treatment related meetings; and

(3) Record of at least 30 hours of formal training directly related to the treatment and evaluation of sex offenders or victims of abuse that was completed within the last three years immediately preceding the date of application.

(a) Completion of formal training shall include documenting 75%, or 22.5 hours of the total required hours, in the following essential subjects:

- (A) Assessment and diagnosis;

- (B) Cognitive therapy;
- (C) Counseling and psychotherapy;
- (D) Cultural/ethnic issues;
- (E) Ethics applicable to working with a forensic population;
- (F) Human development with special attention to sexual development and healthy sexuality;
- (G) Interviewing skills;
- (H) Knowledge of family dynamics as related to sex offending;
- (I) Psychometric and psycho-physiological testing;
- (J) Psychopathology;
- (K) Relapse prevention;
- (L) Relationship and social skills training;
- (M) Risk assessment;
- (N) Sexual arousal control;
- (O) Social support networks;
- (P) Victim awareness and empathy.

(b) Completion of formal training shall include documenting 25%, or 7.5 hours of the total required hours, in the following areas of training and knowledge:

- (A) Supervision;
- (B) Assessment and treatment of mental illness including neuropsychological disorders;
- (C) Couples and family therapy;
- (D) Family reunification;
- (E) Pharmacological therapy;
- (F) Substance abuse treatment.

(4) Verification of and compliance with the requirements of direct supervision by a certified clinical sex offender therapist, according to OAR 331-810-0055.

Stat. Auth.: ORS 675.375, 675.400, 676.615

Stat. Implemented: ORS 675.375, 675.400

Hist.: HLA 1-2008(Temp), f. 3-14-08, cert. ef. 3-15-08 thru 9-1-08; HLA 2-2008, f. 5-27-08, cert. ef. 6-1-08

331-810-0038

Waivers

If an applicant is unable to provide verification of the experience or supervision required under OAR 331-810-0020, 331-810-0030 or 331-810-0035, the board may consider the following information in determining whether a waiver of verification will be issued:

- (1) When the training or direct client services occurred;
- (2) Where the training or direct client services occurred;
- (3) The reasons for the inability of the applicant to provide training verification or substantiate the required supervision; and
- (4) The diligence the applicant used in attempting to provide the training verification or to document supervision.

NOTE: This provision does not disregard or unilaterally exempt the applicant from meeting the education, training and experience required under ORS 675.365; however, it enables the Board to exercise discretion in accepting alternative means of documentation when deemed appropriate, on a case-by-case basis.

Stat. Auth.: ORS 675.375, 675.400, 675.410 & 676.615

Stat. Implemented: ORS 675.375, 675.400 & 675.410

Hist.: HLA 9-2008(Temp), f. & cert. ef. 9-15-08 thru 12-1-08; HLA 11-2008, f. 11-26-08, cert. ef. 12-1-08

331-810-0040

Reciprocity; Equivalencies

Pursuant to ORS 675.380, an applicant who is recognized as a clinical sex offender therapist or associate sex offender therapist in another state may be issued Oregon certification as a sex offender therapist if the applicant's education, experience and formal training meet similar requirements for Oregon certification under ORS 675.375 and OAR 331-810-0020.

(1) Educational equivalency includes completion of the following:

(a) A masters or doctoral degree in social work, psychology, counseling, or educational psychology from a regionally accredited institution of higher education; or

(b) A masters or doctoral degree in an equivalent field from a regionally accredited institution of higher education and documentation of thirty graduate semester hours or forty-five graduate quarter hours in approved subject content listed in subsection (2) of this section.

(2) Approved subject content includes at least five graduate semester hours or seven graduate quarter hours in counseling, psychotherapy, and personality theory, and five graduate semester hours

or seven graduate quarter hours in at least two of the following content areas:

- (a) Counseling and psychotherapy;
- (b) Personality theory;
- (c) Behavioral science and research;
- (d) Psychopathology/personality disorders;
- (e) Assessment/tests and measurement;
- (f) Group therapy/family therapy;
- (g) Human growth and development/sexuality; and
- (h) Corrections/criminal justice.

(3) The applicant shall arrange for Affidavit of Licensure as defined in OAR 331-030-0040 be provided to the Agency. The applicant is responsible for payment of any service fee the originating agency may assess for producing the affidavit.

(4) Applicants must document active practice as a certified sex offender therapist in another state during the previous two years immediately preceding application for Oregon certification.

(5) Applicants shall provide required documentation listed in OAR 331-030-0000, 331-820-0010 and other information as may be requested by the agency to determine equivalent education, experience and formal training for Oregon certification as a sex offender therapist.

Stat. Auth.: ORS 675.375, 675.380, 675.400 & 676.615

Stat. Implemented: ORS 675.375, 675.380 & 675.400

Hist.: HLA 1-2008(Temp), f. 3-14-08, cert. ef. 3-15-08 thru 9-1-08; HLA 2-2008, f. 5-27-08, cert. ef. 6-1-08; HLA 2-2010, f. & cert. ef. 3-15-10; HLA 4-2010, f. & cert. ef. 5-18-10

331-810-0050

Supervision Purpose Statement

(1) The importance of ongoing supervision is crucial to the development of an associate sex offender therapist. ORS 675.365(4) defines the “minimum” number of hours of direct supervision as being two hours of supervision by a certified clinical sex offender therapist for each 45 hours of direct clinical contact with a sex offender. The Board is charged with ensuring consumer protection, through setting appropriate practice standards and professional accountability for Oregon certification, and therefore recommends approved supervisors take a more prudent and professional position attuned to industry standards when establishing supervision agreements.

(2) Supervision is a professional relationship between a qualified clinical therapist acting as supervisor and an associate therapist. A clinical therapist, who is approved as a “supervisor”, in contrast to the role of a consultant, carries the authority to direct caseload and treatment plans. Supervision, in contrast to treatment, will identify counter-transference issues and develop a plan for the associate therapist to work through those issues independently.

(3) Discussion between the supervisor and the associate therapist are based on case notes, charts, records, and available audio or visual tapes of clients. The certified associate sex offender therapist present assessments, diagnoses, and treatment plans of clients being seen. The focus is on the appropriateness of these treatment plans and the supervisee’s therapeutic skill in promoting change in the client. The supervisor has the authority to decide the appropriateness of the associate therapist’s client population against his or her level of expertise.

(4) Any variance from the requirements of OAR 331-810-0055 must be based on the individual circumstances and in the best interest of the associate and client, and in conformance with generally accepted standards of supervision and oversight. On such occasion, the therapist must document in writing the reasons for the variance in the contract or agreement. Failure to document the reasons for variance from stated requirements creates a presumption that the variance was not in the best interest of the supervisor, associate or client.

Stat. Auth.: ORS 675.375, 675.400, 675.410, 676.615

Stat. Implemented: ORS 675.375, 675.400, 675.410

Hist.: HLA 2-2008, f. 5-27-08, cert. ef. 6-1-08

331-810-0055

Supervision Requirements

Supervision of a certified associate sex offender therapist is considerably different than consultation with other professionals. Consultation is solely advisory; consultants do not assume responsibility for those individuals with whom they consult. Supervision of associates requires that the supervisor take full ethical and legal responsibility for the quality of work of the associate therapist. A supervisor may not supervise more than two associate therapists at any time.

(1) An associate therapist shall establish and maintain a supervision contract with a clinical therapist which, at a minimum, meets the requirements of OAR 331-810-0050, in addition to the provisions of 331-810-0040.

(2) A minimum of two hours supervision by a clinical therapist is required for each 45 hours of direct clinical contact an associate therapist has with a sex offender.

NOTE: The Board recommends one hour of supervision for each 10 hours of direct clinical contact with a sex offender.

(3) Documentation of the dates and content of supervision meetings shall be submitted to the agency to verify appropriate supervision requirements have been met.

(4) All supervision shall take place concurrently with practice hours.

(5) Supervision includes, but is not limited to:

- (a) Discussion of services provided by the associate therapist;
- (b) Case selection, diagnosis, treatment plan, and review of each case or work unit of the associate therapist;
- (c) Discussions regarding theory and practice of the work being conducted;
- (d) Review of Oregon’s laws, rules, and criminal justice procedures relevant to the work being conducted;

(e) Discussion of the standards of practice for supervisors and associates as adopted by the agency and the ethical issues involved in providing professional services for sex offenders;

(f) Discussion regarding coordination of work with other professionals and parties;

(g) Discussion of relevant professional literature and research; and

(h) Periodic review of the contract.

(6) The supervisor shall:

(a) Avoid presenting to the associate therapist as having qualifications in areas that they do not have;

(b) Provide sufficient training and supervision to the associate therapist to assure the health and safety of the client and community;

(c) Have expertise and knowledge to directly supervise the associate therapist’s work; and

(d) Assure that the associate therapist being supervised has sufficient and appropriate education, background, and preparation for the work he or she will be doing.

(7) The supervisor and associate therapist shall enter into a formal written contract that defines the parameters of the professional relationship. The contract shall be submitted to the agency for approval and shall include:

(a) Supervised areas of professional activity;

(b) Amount of supervision time and the frequency of supervisory meetings. This information may be presented as a ratio of supervisory time to clinical work conducted by the associate therapist;

(c) Supervisory fees and business arrangements, when applicable;

(d) Nature of the supervisory relationship and the anticipated process of supervision;

(e) Selection and review of clinical cases;

(f) Methodology for recordkeeping, evaluation of the associate, and feedback; and

(g) How the associate therapist will be represented to the public and the parties.

(8) Supervision of associate therapists shall involve regular, direct, face-to-face supervision. Depending on the associate therapist’s skill and experience levels, the clinical therapist’s supervision shall include direct observation of the associate therapist by sitting in session, audio tape recording, videotaping, or other means of observation.

(9) In some cases, such as geographic location or disability, more flexible supervision arrangements may be allowed. The supervisor shall submit requests for more flexible supervision arrangements to the agency for approval.

(10) The supervisor shall assure that the associate therapist is prepared to conduct professional work, and shall assure adequate supervision of the associate therapist. The supervisor should meet face-to-face with the associate therapist one hour for every ten hours of supervised professional work; but shall meet minimally 2 hours for every 45 hours of direct contact with sex offenders. Supervision meetings shall regularly occur at least every other week.

(11) A supervisor may not undertake a contract that exceeds the supervisor's ability to comply with supervision standards.

(12) The agency recognizes the needs of certain locales, particularly rural areas, and may allow a variance from the standards of this rule. Any variance request shall be submitted to the agency for approval with the supervision contract. Variances will be granted or denied in writing within thirty days.

(13) The nature of the associate therapist and clinical therapist supervisory relationship shall be communicated to the public, other professionals, and all clients served.

(14) An associate therapist shall represent himself or herself as an associate when performing clinical work and shall provide the name of the contracted supervisor.

(15) The supervisor shall cosign all written reports and correspondence prepared by the associate therapist. The written reports and correspondence shall include a statement that indicates the work has been conducted by the associate therapist acting under the clinical therapist's supervision.

(16) Both the supervisor and associate therapist shall maintain full documentation of the work done and supervision provided. The agency may audit the supervisor and associate therapist's records to assure compliance with laws and rules.

(17) All work conducted by the associate therapist is the responsibility of the supervisor. The supervisor shall have authority to direct the practice of the associate therapist.

(18) It is the supervisor's responsibility to correct problems or end the supervision contract if the associate therapist's work does not protect the interests of the clients and community. If the supervisor ends the contract, he or she shall notify the agency in writing within thirty days of ending the contract. A new contract must be filed with the agency.

(19) Supervision is a power relationship. The supervisor shall not use his or her position to take advantage of the associate therapist. This subsection is not intended to prevent a supervisor from seeking reasonable compensation for supervisory services.

(20) A supervisor shall only delegate responsibilities to an associate therapist, who has been assessed to have the competency to perform the delegated professional tasks.

(a) Supervision arrangements for associate therapists shall be agreed upon in writing and shall specify:

(b) Expected associate therapist duties;

(c) The scope and focus of the supervision; and

(d) The frequency and durations of meetings between the supervisor and the associate therapist to review the associate therapist's professional performance.

(e) The supervision of the associate therapist shall provide proper training to persons who delegate professional tasks and take reasonable steps to see that such persons perform services responsibly, completely, and ethically.

(f) The supervisor shall not engage in sexual relationships with an associate therapist over whom the supervisor has evaluative or direct authority, as such relationships are likely to impair judgment or be exploitative.

Stat. Auth.: ORS 675.375, 675.400, 675.410, 676.615

Stat. Implemented: ORS 675.375, 675.400, 675.410

Hist.: HLA 2-2008, f. 5-27-08, cert. ef. 6-1-08

DIVISION 820

LICENSURE AND RENEWAL

331-820-0010

Application Requirements

(1) An individual applying for certification as a sex offender therapist under ORS 675.370 shall submit an application form prescribed by the agency, which contains information listed in OAR 331-030-0000, payment of required application and certification fees, and satisfactory evidence of meeting qualification criteria according to one of the following certification pathways:

(a) Clinical sex offender therapist: required documentation pertaining to education, training and experience listed in OAR 331-810-0020;

(b) Associate sex offender therapist: required documentation pertaining to education, training, experience and supervision listed in OAR 331-810-0030;

(c) Individuals applying under a time limited grandfather provision: required documentation pertaining to education, training and experience listed in OAR 331-810-0035; or

(d) Individuals applying under ORS 675.380 reciprocal or equivalent credentials: required documentation pertaining to education, training and experience listed in OAR 331-810-0040.

(2) An application for certification shall be accompanied by a proposed professional disclosure statement, required under ORS 675.375(1), and the applicant's fingerprint and criminal background check forms prescribed by the agency.

Stat. Auth.: ORS 675.375, 675.400, 676.607, 676.615,

Stat. Implemented: ORS 675.375, 675.400, 675.410

Hist.: HLA 1-2008(Temp), f. 3-14-08, cert. ef. 3-15-08 thru 9-1-08; HLA 2-2008, f. 5-27-08, cert. ef. 6-1-08

331-820-0020

License Issuance and Renewal

(1) Certified clinical sex offender therapists and certified associate sex offender therapists are subject to the provisions of OAR 331-030-0010 regarding the issuance and renewal of a certificate, and to the provisions of 331-030-0020 regarding the authorization to practice, identification and the requirements for issuance of a duplicate authorization.

(2) Notwithstanding ORS 675.375(5) and 331-030-0010(1), the certificate will be issued for a two-year period from the date all qualifications have been met.

(3) Renewal of a certificate shall be made in advance of the certification expiration date by submitting the following to the agency:

(a) Renewal application form;

(b) Renewal fees;

(c) Signed attestation of completion of required continuing education according to OAR 331-830-0010; and

(d) Satisfactory documentation recording at least 100 hours of clinical experience per year preceding renewal, of which 50 hours is related to direct clinical contact with sex offenders. Refer to OAR 331-830-0010.

(4) A completed certificate renewal application received by the agency or postmarked after a certificate has expired, but within three years from the expiration date, may be approved upon payment of the application for renewal and delinquency fees for each year in expired status, signed attestation of having obtained required continuing education pursuant to the provisions of ORS 675.375(5)(c) and OAR 331-810-0020 or 331-810-0030, and completion of the prescribed number of hours of clinical experience required in ORS 675.375(5)(b) for each year in expired status.

(5) A certificate that has been expired for more than three years shall be deemed invalid and may be reactivated by submitting to the agency the following requirements:

(a) Application form and information required according to OAR 331-030-0000 and 331-820-0010;

(b) Payment of application, reactivation and certificate fees;

(c) Completion of prescribed continuing education during period of inactive certification.

(6) Evidence of required continuing education shall be provided at the time of renewal by means of a prescribed self-attestation form certifying participation in approved continuing education.

(7) Continuing education documentation shall be accumulated and held by the certificate holder for a period of 3 years following renewal, or until submitted to the agency at the time of audit within the three year period.

Stat. Auth.: ORS 675.375, 675.400, 675.410, 676.615

Stats. Implemented: ORS 675.375, 675.400, 675.410

Hist.: HLA 1-2008(Temp), f. 3-14-08, cert. ef. 3-15-08 thru 9-1-08; HLA 2-2008, f. 5-27-08, cert. ef. 6-1-08

DIVISION 830

CONTINUING EDUCATION

331-830-0005

Continuing Education Purpose Statement

The aim of continuing education for sex offender treatment therapists is to ensure that professionals practicing in this specialty field are knowledgeable of current scientific and practice principles that affect the supervision and treatment of sex offenders in community-based treatment. Since the treatment of sex offenders in communities raises significant public safety concerns, continuing education is required to help sex offender treatment therapists deliver the highest quality of professional service by being familiar with current developments in a rapidly changing profession.

Stat. Auth.: ORS 675.375, 675.400, 675.410, 676.615

Stat. Implemented: ORS 675.375, 675.400, 675.410

Hist.: HLA 2-2008, f. 5-27-08, cert. ef. 6-1-08

331-830-0010

Continuing Education Requirements

(1) To ensure continuing efforts on the part of Oregon certified clinical sex offender therapists and certified associate sex offender therapists to remain current with new developments in the treatment of sexual abusers and the mental health profession, and to encourage diversified training and qualifications in the profession, continuing education is required as a condition of certification.

(2) Continuing education experiences are programs beyond the basic education required to obtain certification which are designed to promote and enrich knowledge, improve skills, and develop attitudes for the enhancement of the practices of sex offender therapists, thus improving sex offender therapies provided to the public.

(3) To be in compliance with the provisions of ORS 675.360 to 675.410 and the rules adopted by the agency, clinical therapists and associate therapists shall complete a minimum of 15 hours continuing education in the field of sex offender treatment during each year within a renewal cycle.

(4) Continuing education includes training related to sex offender treatment consisting of the following subject matter:

- (a) Assessment and diagnosis;
- (b) Cognitive therapy;
- (c) Counseling and psychotherapy;
- (d) Cultural/ethnic issues;
- (e) Ethics applicable to working with a forensic population;
- (f) Human development with special attention to sexual development and healthy sexuality;
- (g) Interviewing skills;
- (h) Knowledge of family dynamics as related to sex offending;
- (i) Psychometric and psycho-physiological testing;
- (j) Psychopathology;
- (k) Relapse prevention;
- (l) Relationship and social skills training;
- (m) Risk assessment;
- (n) Sexual arousal control;
- (o) Social support networks;
- (p) Victim awareness and empathy.
- (q) Supervision;
- (r) Assessment and treatment of mental illness including neuropsychological disorders;
- (s) Couples and family therapy;
- (t) Family reunification;
- (u) Pharmacological therapy;
- (v) Substance abuse treatment.

(5) An instructor, discussion leader, or speaker shall be given two hours of credit for subject preparation for each hour of presentation time, plus one additional hour of credit for each hour of actual presentation time. For example, a qualified instructor who conducts a one hour qualified program shall be given credit of three hours; a qualified instructor who conducts a one and one-half hour qualified program shall be given credit of four and one-half hours.

(6) Credit shall not be given for more than 5 hours of continuing education credit in a reporting period for lectures (preparation and teaching) and published material combined.

(6) The agency shall accept any continuing education that reasonably falls within the categories listed in subsection (4) of this rule.

The agency relies upon each individual therapist's integrity with meeting the intent of continuing education requirements.

(7) Continuing education requirements apply whether the applicant renewing a certificate is living or working within Oregon or outside of the state while Oregon certification is maintained.

(8) The agency may grant exemptions in whole or part from continuing education requirements, including extension of deadlines, in documented hardship cases.

Stat. Auth.: ORS 675.375, 675.400, 675.410, 676.615

Stat. Implemented: ORS 675.375, 675.400, 675.410

Hist.: HLA 2-2008, f. 5-27-08, cert. ef. 6-1-08

331-830-0020

Continuing Education: Audits, Required Documentation & Sanctions

(1) The Oregon Health Licensing Agency will select a prescribed percentage of certification records for audit to verify compliance with continuing education requirements.

(2) Licensees notified of selection for audit of continuing education attestation shall submit to the agency, within 30 calendar days from the date of issuance of the notification, satisfactory evidence of participation in required continuing education.

(3) Documentation of a certificate of completion of attendance at a program or course provided by the sponsor shall include:

- (a) Name of sponsoring institution/association or organization;
- (b) Title of presentation and description of content;
- (c) Name of instructor or presenter;
- (d) Date of attendance and duration in hours;
- (e) Course agenda;
- (f) Official transcript, diploma, certificate, statement or affidavit from the sponsor, attesting to attendance.

(4) If documentation of continuing education is invalid or incomplete, the certificate holder shall correct the deficiency within 30 calendar days from the date of notice. Failure to correct the deficiency within the prescribed time shall constitute grounds for disciplinary action.

(5) Misrepresentation of continuing education or failing to meet continuing education requirements or documentation may result in disciplinary action, which may include but is not limited to assessment of a civil penalty and suspension or revocation of the certification.

Stat. Auth.: ORS 675.375, 675.385, 675.400, 675.410, 676.615, 676.992

Stat. Implemented: ORS 675.375, 675.400, 675.410

Hist.: HLA 2-2008, f. 5-27-08, cert. ef. 6-1-08

DIVISION 840

CODE OF PROFESSIONAL CONDUCT

331-840-0010

Standards of Practice

Sex offender therapists are also credentialed health professionals, and are subject to the standards of practice of their primary field of practice. However, standards of practice vary from profession to profession, and sex offender evaluation and treatment represents significant differences in practice from general mental health interventions.

(1) The standards set forth in OAR chapter 331, division 840 apply to all certified clinical sex offender therapists and certified associate sex offender therapists, hereafter referred to as certified sex offender therapist as specified in ORS 675.365(3).

(2) Standards of practice are necessary due to the unique characteristics of this area of specialized practice, the degree of control that a certified sex offender therapist exercises over the lives of clients, and the community protection issues inherent in this work.

(3) Failure to comply with these standards may constitute unprofessional conduct, which is subject to discipline under ORS 676.612.

(4) Any deviation from the standards of OAR 331-840-0020 must be based on the individual circumstances and in the best interest of the client, and in conformance with generally accepted standards of sex offender treatment and client care. On such occasion, the therapist must document in writing the reasons for the deviation in the client's records. Failure to document the reasons for the deviation from stated standards creates a presumption that the deviation was not in the best interest of the client.

Stat. Auth.: ORS 675.390, 675.400, 675.410, 676.607, 676.612, 676.615

Stats. Implemented: ORS 675.390, 675.400

Hist.: HLA 2-2008, f. 5-27-08, cert. ef. 6-1-08

331-840-0020

Professional Conduct and Client Relationships

(1) The Sex Offender Treatment Board adopts the 2001 Association for the Treatment of Sexual Abusers (ATSA) Professional Code of Ethics, Ethical Principles, to the extent it does not conflict with ORS 675.360 through 675.410, 676.605 through 676.625, and any rules adopted by the agency.

(2) A copy of the Professional Code of Ethics may be accessed at the web site: <http://www.atsa.com/pdfs/COE.pdf>. The information may also be available by contacting ATSA at the following address: 4900 S.W. Griffith Drive, Suite 274, Beaverton, Oregon U.S.A. 97005, Phone: (503) 643-1023, Fax: (503) 643-5084, E-mail: atsa@atsa.com.

(3) Therapists shall adhere to ATSA ethical principles relating to professional conduct, payment of services, training and expertise, personal problems and conflicts, supervisory relationships, client relationships, multiple relationships, confidentiality, professional relationships, research and publications, and public information and advertising.

(4) Therapists shall not engage in sexual contact or sexual activity with their clients, former clients, or any person participating in the treatment process of a client while therapy is ongoing.

(5) Sexual misconduct includes but is not limited to:

(a) Sexual intercourse;

(b) Touching the breasts, genitals, anus or any sexualized body part except as consistent with accepted community standards of practice for examination, diagnosis and treatment and within the health care practitioner's scope of practice;

(c) Rubbing against a patient or client or key party for sexual gratification;

(d) Kissing;

(e) Hugging, touching, fondling or caressing of a romantic or sexual nature;

(f) Examination of or touching genitals without using gloves;

(g) Not allowing a patient or client privacy to dress or undress except as may be necessary in emergencies or custodial situations;

(h) Not providing the patient or client a gown or draping except as may be necessary in emergencies;

(i) Dressing or undressing in the presence of the patient, client or key party;

(j) Removing patient or client's clothing or gown or draping without consent, emergent medical necessity or being in a custodial setting;

(k) Encouraging masturbation or other sex act in the presence of the health care therapist;

(l) Masturbation or other sex act by the health care therapist in the presence of the patient, client or key party;

(m) Suggesting or discussing the possibility of a dating, sexual or romantic relationship after the professional relationship ends;

(n) Terminating a professional relationship for the purpose of dating or pursuing a romantic or sexual relationship;

(o) Soliciting a date with a patient, client or key party;

(p) Discussing the sexual history, preferences or fantasies of the health care therapist;

(q) Any behavior, gestures, or expressions that may reasonably be interpreted as seductive or sexual;

(r) Making statements regarding the patient, client or key party's body, appearance, sexual history, or sexual orientation other than for legitimate health care purposes;

(s) Sexually demeaning behavior including any verbal or physical contact which may reasonably be interpreted as demeaning, humiliating, embarrassing, threatening or harming a patient, client or key party;

(t) Photographing or filming the body or any body part or pose of a patient, client, or key party, other than for legitimate health care purposes; and

(u) Showing a patient, client or key party sexually explicit photographs, other than for legitimate health care purposes

Stat. Auth.: ORS 675.390, 675.400, 675.410, 676.607, 676.612, 676.615 Stats.

Implemented: ORS 675.390, 675.400

Hist.: HLA 2-2008, f. 5-27-08, cert. ef. 6-1-08

331-840-0030

Communications with other Professionals

Certified sex offender therapists may establish professional relationships with corrections or probation officers and other mental health professionals for the purpose of effective supervision and monitoring of an offender's behavior in the community. When appropriate, the therapist shall seek an authorization for release of information from the client to communicate with such agencies for treatment or monitoring purposes.

(1) Any violation of the treatment plan or contract, including court orders or parole agreements, or conditions of supervision shall be reported to the parole officer or other supervising officer.

(2) Therapists shall make periodic progress reports to the supervising officer as mutually agreed upon. Additional information regarding treatment progress shall be provided in a timely manner when requested by the court or other supervising officer.

(3) Prior to implementation, plans for contact with the victim, potential victims and plans for family reunification or return (where appropriate) should be reviewed with the supervising officer.

(4) Where appropriate and consistent with the adult offender's informed consent, certified sex offender therapists shall communicate with the victim's therapist, guardian ad litem, custodial parent, guardian, caseworker, other family members, or other involved professional in making decisions regarding family reunification or return, or victim contact with the offender.

Stat. Auth.: ORS 675.390, 675.400, 675.410, 676.607, 676.612, 676.615 Stats.

Implemented: ORS 675.390, 675.400

Hist.: HLA 2-2008, f. 5-27-08, cert. ef. 6-1-08

331-840-0040

Mandatory Reporting

(1) Pursuant to ORS 675.390, the Sex Offender Treatment Board is required to report to the Oregon Health Licensing Agency any conviction, determination, or finding of which they have personal knowledge that any person certified as a clinical sex offender therapist or associate sex offender therapist has committed an act which constitutes unprofessional conduct under 676.612 and the provisions of OAR 331-840-0010.

(2) The following persons are required to report the information identified in subsection (1) of this section:

(a) Persons certified as a clinical sex offender therapist or certified as an associate sex offender therapist;

(b) The president, chief executive officer, or designated official of any professional association or society whose members are a certified sex offender therapist;

(c) Prosecuting attorneys and deputy prosecuting attorneys;

(d) Community corrections officers employed by the Oregon Department of Corrections;

(e) Juvenile probation or parole counselors who provide counseling or supervision to juveniles;

(f) The president, chief executive officer, or designated official of any public or private agency which employs a certified sex offender therapist;

(g) The president, chief executive officer, or designated official of any credentialing agency for health professionals.

(3) Reports under this section shall be made in writing, and shall include the name, address, and telephone number of the person making the report, the name and address of the person about whom the report is made, and complete information about the circumstances giving rise to the report.

Stat. Auth.: ORS 675.390, 675.400, 675.410, 676.607, 676.612, 676.615 Stats.

Implemented: ORS 163, 419B, 675.390, 675.400

Hist.: HLA 2-2008, f. 5-27-08, cert. ef. 6-1-08

331-840-0050

Client Confidentiality; Disclosure and Informed Consent

For the purpose of clarifying requirements, the term "client" as used in this rule, means the sex offender which is receiving the treatment from the certified clinical sex offender therapist or certified associate sex offender therapist, referred to as "therapist" in this rule unless otherwise specifically noted.

(1) The certified sex offender therapist is responsible for insuring that clients, consultation parties, family members, research participants, organizations or agencies, and all other professional and

work related contacts fully understand issues related to confidentiality. This includes, but is not limited to:

- (a) Informing clients of the limits of confidentiality;
- (b) Informing clients of any circumstances that may cause an exception to the agreed-upon confidentiality;
- (c) Specifically informing clients about mandatory reporting requirements; and
- (d) Clarifying issues of confidentiality where multiple parties are involved.

(2) Therapists shall comply with the provisions of ORS 675.390, and shall notify clients of the limits of confidentiality imposed on therapists by the provisions of ORS 675.390 and rules adopted by the agency.

(3) Therapists shall comply with mandated reporting laws and statutes. No part of this rule shall be construed as releasing therapists from such obligations. If the circumstances allow, therapists shall inform clients that they will comply with the mandated reporting requirements.

(4) Unless reporting is mandated, written permission is required before any data may be disclosed to persons beyond a therapist's staff. Clients shall be informed of the reason for the release of information.

(5) Therapists providing services within the criminal justice setting shall inform all parties involved of the level of confidentiality that applies.

(6) Therapist information shall not communicate to others without the written and informed consent of the client, unless the following circumstances apply:

(a) The client presents a clear and immediate danger to another individual or individuals.

(b) The client presents a clear and immediate danger to him/herself.

(c) There is an obligation to comply with the specific governmental statutes or regulations requiring reporting to authorities.

(7) Therapists shall ensure that a client is provided informed consent when an individual under the therapist's supervision is providing services to the client. The client must be informed of the name of the therapist who is supervising the associate therapist and any affect on confidentiality.

(8) Therapists shall clarify, in a manner that the client is capable of understanding, issues of confidentiality in cases involving functionally disabled individuals or minors, when sharing information with parents, guardians, or agencies that may have custody of the functionally disabled individual or minor.

(9) When working with clients incapable of giving informed consent, including functionally disabled individuals or minors, the therapist is still responsible to:

(a) Inform the client about any proposed assessments or interventions in a manner commensurate with the person's psychological, functional, or developmental capabilities;

(b) Seek their help and participation in such interventions; and

(c) Consider such persons' preferences and best interest.

(10) Therapists who provide service to several persons who have a relationship (such as husband and wife or family members), shall clarify at the outset how confidentiality will apply among participants and to any external individual or entity (e.g., criminal justice).

(11) Therapists shall obtain written informed consent from a legally authorized person or agency for providing services, for participation in research, and in video taping for educational purposes, in instances where persons are legally capable of giving informed consent.

(12) Therapists shall not share confidential information with colleagues that might reasonably lead to the identification of a sex offender, research participant, organization or other person with whom the therapist has a confidential relationship.

(13) Therapists shall protect the confidentiality of participants when utilizing audio tape or video tape information in the context of training, workshops or research studies. Such tapes will be used only with the written and informed consent of all individuals portrayed on the tapes for that particular use (i.e., training, workshops, and research studies).

(14) Live demonstrations of treatment techniques with current or former clients or their families is considered exploitative and compromises confidentiality beyond what can be justified relative to education benefits.

Stat. Auth.: ORS 675.390, 675.400, 675.410, 676.607, 676.612, 676.615 Stats.
Implemented: ORS 163, 419B, 675.390, 675.400
Hist.: HLA 2-2008, f. 5-27-08, cert. ef. 6-1-08

331-840-0060

Client Records

For the purpose of clarifying record keeping requirements, the term "client" as used in this rule, means the sex offender which is receiving the treatment from the certified sex offender therapist who will be providing treatment.

(1) Required Records. Therapists shall record, update and maintain documentation for each client relevant to health history, clinical examinations and treatment, and financial data. Documentation shall be written or electronic. Records shall include the following information:

(a) Basic client information, including name, address, telephone number and dates of service;

(b) Health history relevant to sex offender evaluation or treatment plan(s), including referral to other mental health care provider or physician.

(c) Date and description of services rendered in the form of "chart notes", including any complications. Chart notes shall include the recorder's initials, certification number and professional title if multiple practitioners provide service to the client.

(2) Record Format. Records and documentation shall be accurate, complete, and legible, typed or recorded using ink. Legible hand-written or electronic records are acceptable.

(3) Record Identifiers. Client records listed in subsection (1) of the rule shall include the therapist's name, license number, professional title or abbreviation, and signature or initials somewhere on the documentation as a means of identifying the person who is providing service to the client. This information may be affixed to the record(s) in the form of a professional stamp or handwritten entry.

(4) Record Retention. All client records and documentation, written or archived electronically by computer, shall be stored and maintained for a minimum of seven years after the therapist has last seen the client or past the age of minority, so that the records are safeguarded, readily retrievable, and available for inspection by the Oregon Health Licensing Agency's representative.

Stat. Auth.: ORS 675.390, 675.400, 675.410, 676.615
Stats. Implemented: ORS 675.390, 675.400, 675.410
Hist.: HLA 2-2008, f. 5-27-08, cert. ef. 6-1-08

331-840-0070

Practice Standards and Guidelines

In accordance with ORS 675.400, all certified clinical and associate sex offender therapists as defined in ORS 675.365 and OAR 331-800-0010 must adhere to the following practice standards and guidelines for the evaluation, treatment and management of adult male sex offenders, juvenile sex offenders and sexual offenders with intellectual and other developmental disabilities:

(1) Adult Male Sex Offenders: The 2004 Association for the Treatment of Sexual Abusers (ATSA), Practice Standards and Guidelines. A copy of the Practice Standards and Guidelines may be purchased at the Web site: <http://www.atsa.com/form.html>. The information is also available by contacting ATSA: 4900 S.W. Griffith Drive, Suite 274, Beaverton, Oregon U.S.A. 97005, Phone: (503) 643-1023, Fax: (503) 643-5084, E-mail: atsa@atsa.com.

(2) Juvenile Sex Offenders: Practice Standards and Guidelines, adopted by the agency and board, January, 2010. A copy may be accessed on the agency Web site: <http://www.oregon.gov/OHLA/SOTB/index.shtml>. The information is also available by contacting the agency at: 700 Summer St. NE, Suite 320, Salem, OR 97301-1287. Phone: (503) 378-8667, Fax: (503) 585-9114, E-mail: ohla.info@state.or.us.

(3) Sex Offenders with Intellectual and Other Developmental Disabilities: Practice Standards and Guidelines, adopted by the agency and board, January, 2010. A copy of the Practice Standards and Guidelines may be accessed at the agency Web site: <http://www.oregon.gov/OHLA/SOTB/index.shtml>. The information is also available by contacting the agency at: 700 Summer St. NE, Suite 320, Salem, OR 97301-1287. Phone: (503) 378-8667, Fax: (503) 585-9114, E-mail: ohla.info@state.or.us.

(4) Failure to comply with OAR Chapter 331, Division 840 may result in disciplinary action under ORS 676.612.

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Stat. Auth.: ORS 676.605, 676.606, 675.615, 675.400, 675.410 & 675.360
Stats. Implemented: ORS 676.360, 676.605, 676.606, 676.615, 675.400 & 676.410
Hist.: HLA 2-2010, f. & cert. ef. 3-15-10; HLA 4-2010, f. & cert. ef. 5-18-10

DIVISION 850

DISCIPLINE AND ENFORCEMENT

331-850-0010

Investigative Authority

The Oregon Health Licensing Agency may initiate and conduct investigations of matters relating to the practice of Sex Offender Treatment, pursuant to ORS 676.608, and may take appropriate disciplinary action in accordance with the provisions of 676.612 and 675.385.

Stat. Auth.: ORS 675.385, 676.608, 676.612

Stats. Implemented: ORS 675.385, 676.608, 676.612

Hist.: HLA 1-2008(Temp), f. 3-14-08, cert. ef. 3-15-08 thru 9-1-08; HLA 2-2008, f. 5-27-08, cert. ef. 6-1-08

DIVISION 900

BODY PIERCING

331-900-0000

Body Piercing Definitions

The following definitions apply to OAR chapter 331, division 900:

(1) "Affidavit of Licensure" has the meaning set forth in OAR 331-030-0040.

(2) "Agency" means the Oregon Health Licensing Agency.

(3) "APP" means Association of Professional Piercers.

(4) "Body piercing" has the definition set forth in ORS 690.350.

(5) "Direct supervision" means the supervisor or instructor is present in the facility and actively involved in direct oversight and training of students or trainees.

(6) "Earlobe piercing services" means services limited to the soft lower part of the external ear only, not to include cartilage.

(7) "EPA" means United States Environmental Protection Agency.

(8) "FDA" means Food and Drug Administration.

(9) "Field of practice" has the definition set forth in ORS 690.350.

(10) "High-level disinfectant" means a chemical agent, registered with the EPA, which has demonstrated tuberculocidal activity.

(11) "Instruments" means equipment used during body piercing services. Types of instruments include but are not limited to needles, forceps, hemostats, tweezers, and jewelry.

(12) "Official transcript" means:

(a) An original document authorized by the appropriate office in the Oregon Department of Education and certified by a career school licensed under ORS chapter 345 indicating applicant identity information, field of practice(s) enrolled under, specific hour requirements for each field of practice if applicable, enrollment information and a signature by an authorized representative on file with the Agency. Original documents must be submitted directly to the Agency from the educational institution by United States Postal Service mail or other recognized mail service providers in a sealed envelope; or

(b) A document authorized by the appropriate office in the Oregon Department of Education and certified by career school licensed under ORS chapter 345 providing applicant identity information, field(s) of practice studied and completed, specific hour requirements for each field of practice if applicable, enrollment information and a signature by an authorized representative on file with the Agency. Non-original documents shall only be accepted when and in the manner approved by the Agency

(13) "Practitioner" means a person licensed to perform services included within a field of practice.

(14) "Sharps container" means a puncture-resistant, leak-proof container that can be closed for handling, storage, transportation, and disposal. The container must be labeled with the "Biohazard" symbol.

(15) "Single point piercing", also referred to as an anchor or microdermal, means a single point perforation of any body part for the purpose of inserting an anchor with a step either protruding or flush with the skin;

(16) "Standard body piercing" includes all body piercings with the exception of specialty level one genital piercings and specialty level two genital piercings defined under 331-905-0000. Standard body piercing services do not include testes, deep shaft (corpus cavernosa), uvula, eyelids, or sub-clavicle piercings.

Stat. Auth.: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 Sec. 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12; HLA 15-2012(Temp), f. & cert. ef. 10-15-12 thru 4-12-13

331-900-0005

Standard Body Piercing Education or Training

All education curriculum or training for standard body piercing must meet requirements set forth by the Oregon Health Licensing Agency prior to beginning education or training. The theory portion of the curriculum or training must be completed prior to the practical portion of the curriculum or training.

(1) Standard body piercing career school course of study must include 1150 hours of theory and practical education. The education must include a minimum of 250 hours of theory instruction, 900 hours of practical experience and a minimum of 400 practical operations.

(2) The 400 practical operations required under (1) of this rule must include:

(a) 100 practical operations observed by the student;

(b) 100 practical operations in which the student participated; and

(c) 200 practical operations performed by the student under direct supervision, but without assistance.

(3) The 250 hours of theory instruction required in (1) of this section must include the following:

(a) Anatomy, Physiology & Histology: 70 hours;

(b) Infection control: 50 hours;

(c) Jewelry: 15 hours;

(d) Equipment: 20 hours;

(e) Environment: 15 hours;

(f) Ethics and legalities: 15 hours;

(g) Emergencies: 5 hours;

(h) Client consultation: 30 hours.

(i) Oregon laws and rules: 20 hours; and

(j) Discretionary related to body piercing: 10 hours

(4) The 900 hours of practical experience required in (1) of this rule must include client consultation, cleaning, disinfection and sterilization.

(5) The 400 practical operations must include the content listed in section (4) of this rule and the standard body piercing procedures listed in subsections (a) through (r) below:

(a) Ear lobe: minimum of 10;

(b) Helix: minimum of 10;

(c) Conch: minimum of 10;

(d) Industrial: minimum of 10;

(e) Rook: minimum of 10;

(f) Tragus: minimum of 10;

(g) Tongue: minimum of 10;

(h) Navel: minimum of 10;

(i) Male nipple: minimum of 10;

(j) Female nipple: minimum of 10;

(k) Eyebrow: minimum of 10;

(l) Upper Lip: minimum of 10;

(m) Lower Lip: minimum of 10;

(n) Septum: minimum of 10;

(o) Nostril: minimum of 10;

(p) Single point: minimum of 15;

(q) Cheek: minimum of 2;

(r) Additional standard body piercings of choice: minimum of 35 procedures.

(6) As part of the approved course of study, all hours of theory must be completed prior to practical work being performed.

(7) Education must be conducted by a Department of Education, Private Career School licensed instructor who holds an active standard body piercing license.

(8) A Department of Education, Private Career School licensed instructor must provide direct supervision of practical training on a

one-to-one student/teacher ratio for students performing practical training while working on the general public.

(9) Supervised training requirements for standard body piercing trainees: Standard body piercing training program must include 1150 hours of theory and practical education. The training must include a minimum of 250 hours of theory instruction, 900 hours of practical experience and a minimum of 400 practical operations.

(10) The 400 practical operations required under (9) of this rule must include:

- (a) 100 practical operations observed by the student;
- (b) 100 practical operations in which the student participated; and
- (c) 200 practical operations performed by the student under supervision, but without assistance.

(11) The 250 hours of theory instruction required in (9) of this section must include the following:

- (a) Anatomy, Physiology & Histology: 70 hours;
- (b) Infection control: 50 hours;
- (c) Jewelry: 15 hours;
- (d) Equipment: 20 hours;
- (e) Environment: 15 hours;
- (f) Ethics and legalities: 15 hours;
- (g) Emergencies: 5 hours;
- (h) Client consultation: 30 hours.
- (i) Oregon laws and rules: 20 hours; and
- (j) Discretionary related to body piercing: 10 hours

(12) The 900 hours of practical experience required in (9) of this rule must include client consultation, cleaning, disinfection and sterilization.

(13) The 400 practical operations must include the content listed in section (12) of this rule and the standard body piercing procedures listed in subsections (a) through (q) (r) below:

- (a) Ear lobe: minimum of 10;
- (b) Helix: minimum of 10;
- (c) Conch: minimum of 10;
- (d) Industrial: minimum of 10;
- (e) Rook: minimum of 10;
- (f) Tragus: minimum of 10;
- (g) Tongue: minimum of 10;
- (h) Navel: minimum of 10;
- (i) Male nipple: minimum of 10;
- (j) Female nipple: minimum of 10;
- (k) Eyebrow: minimum of 10;
- (l) Upper Lip: minimum of 10;
- (m) Lower Lip: minimum of 10;
- (n) Septum: minimum of 10;
- (o) Nostril: minimum of 10;
- (p) Single point: minimum of 15;
- (q) Cheek: minimum of 2;
- (r) Additional standard body piercings of choice: minimum of 35 procedures.

(14) As part of the approved training, all hours of theory must be completed prior to practical work being performed.

(15) Training must be completed in no less than nine months from the date the Agency issues standard body piercing trainee license.

(16) A supervisor must provide direct supervision of practical training on a one-to-one trainee to trainer ratio when the trainee is working on the general public.

(17) Supervisors of a standard body piercing trainee must adhere to OAR 331-900-0050

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415
 Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35
 Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-900-0010

Earlobe Piercing Temporary License

(1) An earlobe piercing temporary license is valid for one year, and may be renewed one time.

(2) An earlobe piercing temporary license may be issued to an individual for a total of two years, no additional applications or renewals will be accepted by the Agency.

(3) An earlobe piercing temporary license holder must adhere to all standards within OAR 331-900-0095, 331-900-0097, 331-900-0098, 331-900-0099 and all applicable rules listed in OAR 331 division 925.

(4) An earlobe piercing temporary license holder, licensed under ORS 690.365, may provide earlobe piercing services only.

(5) Upon renewal, individuals who held a technician registration for ear piercing prior to January 1, 2012, must apply for and meet the application requirements for an earlobe piercing temporary license or apply for and meet the application requirements for a standard body piercing license.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415
 Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35
 Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-900-0015

Application Requirements for Earlobe Piercing Temporary License

An individual applying for a Earlobe Piercing Temporary License must:

- (1) Meet the requirements of OAR 331 division 30;
- (2) Submit a completed application form prescribed by the Agency, which must contain the information listed in OAR 331-030-0000 and be accompanied by payment of the required application fees;
- (3) Submit proof of being 18 years of age. Documentation may include identification listed under OAR 331-030-0000;
- (4) Submit proof of having a high school diploma or equivalent;
- (5) Submit proof of current blood borne pathogens training from an Agency approved provider;
- (6) Submit proof of current basic first aid training from an Agency approved provider;
- (7) Pay examination fees;
- (8) Submit passing score of Agency approved written examinations in accordance with OAR 331-900-0060(1)(a) and (b) within two years from the date of application;
- (9) Upon passage of all required examinations and before issuance of a license, the applicant must pay all license fees.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415
 Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35
 Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-900-0020

Standard Body Piercing Trainee License

(1) A standard body piercing trainee license is valid for one year, and may be renewed one time.

(2) A standard body piercing trainee license holder, licensed under ORS 690.365, may provide standard piercing services under the direct supervision of an Agency approved supervisor pursuant OAR 331-900-0050 and 331-900-0055.

(3) Supervisors of a standard body piercing trainee must adhere to OAR 331-900-0055.

(4) A standard body piercing trainee license holder is prohibited from performing specialty level one genital piercing services defined under OAR 331-905-0000 and specialty level two genital piercing services defined under OAR 331-905-0000.

(5) A standard body piercing trainee license holder is prohibited from piercing the testes, deep shaft (corpus cavernosa), uvula, eyelids or sub-clavicle.

(6) A standard body piercing trainee license holder must adhere to all standards within OAR 331-900-0100, 331-900-0105, 331-900-0110, 331-900-0115, 331-900-0120, 331-900-0125, 331-900-0130, and all applicable rules listed in OAR 331 division 925.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415
 Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35
 Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-900-0025

Application Requirements for Standard Body Piercing Trainee License

An individual applying for a Standard Body Piercing Trainee License must:

- (1) Meet the requirements of OAR 331 division 30;
- (2) Submit a completed application form prescribed by the Agency, which must contain the information listed in OAR 331-030-0000 and be accompanied by payment of the required application fees;
- (3) Submit proof of being 18 years of age, documentation may include identification listed under OAR 331-030-0000;
- (4) Submit proof of having a high school diploma or equivalent; and
- (5) Submit proof of current cardiopulmonary resuscitation and basic first aid training from an Agency approved provider;
- (6) Submit proof of current blood borne pathogens training from an Agency approved provider; and
- (7) Pay applicable licensing fees.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415
 Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35
 Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-900-0030

Standard Body Piercing License

(1) A standard body piercing license holder, licensed under ORS 690.365, may perform standard body piercing services.

(2) A standard body piercing license is good for one year and becomes inactive on the last day of the month one year from the date of issuance.

(3) A standard body piercing license holder is prohibited from performing specialty level one genital piercing services defined under OAR 331-905-0000 until requirements of 331-905-0040 are met and specialty level two genital piercing services defined under 331-905-0000 until requirements of 331-905-0050 are met.

(4) A body piercing technician licensed prior to January 1, 2012, is prohibited from performing specialty level one genital piercing services defined under OAR 331-905-0000 until requirements of 331-905-0020 are met or specialty level genital piercing two services defined under 331-905-0000 until requirements of 331-905-0030 are met.

(5) A standard body piercing license holder is prohibited from piercing the testes, deep shaft (corpus cavernosa), uvula, eyelids or sub-clavicle.

(6) A standard body piercing license holder must adhere to all standards within OAR 331-900-0100, 331-900-0105, 331-900-0110, 331-900-0115, 331-900-0120, 331-900-0125, 331-900-0130, and all applicable rules listed in OAR 331 division 925.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415
 Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35
 Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-900-0035

Application Requirements for Standard Body Piercing License

(1) An individual applying for licensure to practice standard body piercing must:

- (a) Meet the requirements of OAR 331 division 30;
 - (b) Submit a completed application form prescribed by the Agency, which must contain the information listed in OAR 331-030-0000 and be accompanied by payment of the required application fees;
 - (c) Submit proof of current cardiopulmonary resuscitation and basic first aid training from an Agency approved provider;
 - (d) Submit proof of current blood borne pathogens training from an Agency approved provider;
 - (e) Submit proof of being 18 years of age documentation may include identification listed under OAR 331-030-0000.
 - (f) Submit proof of having a high school diploma or equivalent;
 - (g) Provide documentation of completing a qualifying pathway.
- (2) License Pathway 1- A graduate from an Oregon Licensed Career School for Standard Body Piercing must:

(a) Submit official transcript from a body piercing career school under ORS 345 and showing proof of completion of required standard body piercing curriculum as approved by the Agency under OAR 331-900-0005;

(b) Pay examination fees;

(c) Submit passing score of an Agency approved written examination in accordance with OAR 331-900-0060(1)(c) within two years before the date of application;

(d) Submit a passing score of an Agency approved practical examination in accordance with OAR 331-900-0060(1)(d) within two years before the date of application; and

(e) Upon passage of all required examinations and before issuance of license, applicant must pay all license fees.

(f) An applicant is not required to provide proof of official transcripts from a body piercing career school under ORS 345 if the applicant was previously licensed as a body piercer in Oregon.

(3) License Pathway 2 — An individual qualifying for licensure as a Standard Body Piercing Trainee must:

(a) Submit documentation approved by the Agency showing proof of having completed training listed under OAR 331-900-0005, verified by a supervisor approved under to OAR 331-900-0055, on a form prescribed by the Agency;

(b) Pay examination fees;

(c) Submit passing score of an Agency approved written examination for standard body piercing in accordance with OAR 331-900-0060(1)(c) within two years before the date of application;

(d) Submit a passing score of an agency approved practical examination in accordance with OAR 331-900-0060(1)(d) within two years before the date of application; and

(e) Upon passage of all required examinations and before issuance of license, applicant must pay all license fees.

(4) License Pathway 3 — An individual qualifying for licensure through Reciprocity must:

(a) Submit an affidavit of licensure pursuant to OAR 331-030-0040 demonstrating proof of current license as a body piercer, which is active with no current or pending disciplinary action. The licensing must be substantially equivalent to Oregon licensing requirements pursuant to ORS 690.365. Or if not substantially equivalent the applicant must demonstrate to the satisfaction of the Agency that the applicant has been employed or working as a body piercer full time for three of the last five years.

(b) Pay examination fees;

(c) Submit passing score of an Agency approved written examination in accordance with OAR 331-900-0060(1)(c) within two years before the date of application;

(d) Submit a passing score of an Agency approved practical examination in accordance with OAR 331-900-0060(1)(d) within two years before the date of application; and

(e) Upon passage of all required examinations and before issuance of license, applicant must pay all license fees.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415
 Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35
 Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-900-0040

Temporary Standard Body Piercing License

(1) A temporary standard body piercing license pursuant to ORS 690.365 is a temporary license to perform standard body piercing services on a limited basis, not to exceed 15 consecutive calendar days. A temporary standard body piercing license holder:

(a) May revive the license up to four times, in a 12 month period from the date the Agency receives the initial application. Reviving a license can be done consecutively with no lapse in active license dates;

(b) Must submit all requests to revive a license on a form prescribed by the Agency. Request to revive a license must be received at least 15 days before standard body piercing services are provided unless otherwise approved by the Agency.

(c) Must submit notification of a change in work location on a form prescribed by the Agency at least 24 hours before services are performed; and

(d) Must work in a licensed facility.

(2) A temporary standard body piercing license holder may only perform standard body piercing services.

(3) A temporary standard body piercing license holder is prohibited from performing specialty level one genital piercing services defined under OAR 331-905-0000 and specialty level two genital piercing services defined under OAR 331-905-0000.

(4) A temporary standard body piercing license holder is prohibited from piercing the testes, deep shaft (corpus cavernosa), uvula, eyelids or sub-clavicle.

(5) A temporary standard body piercing license holder must adhere to all standards within OAR 331-900-0100, 331-900-0105, 331-900-0110, 331-900-0115, 331-900-0120, 331-900-0125, 331-900-0130, and all applicable rules listed in OAR 331 division 925.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12; HLA 15-2012(Temp), f. & cert. ef. 10-15-12 thru 4-12-13

331-900-0045

Application Requirements for Temporary Standard Body Piercing License

An individual applying for a Temporary Standard Body Piercing License must:

(1) Meet the requirements of OAR 331 division 30;

(2) Submit a completed application form prescribed by the Agency, which must contain the information listed in OAR 331-030-0000 and be accompanied by payment of the required application fees and must be received at least 15 days before standard body piercing services are provided to clients;.

(3) Submit proof of being 18 years of age. Documentation may include identification listed under OAR 331-030-0000;

(4) Submit proof of current blood borne pathogens training from an Agency approved provider;

(5) Attest to six months of training or experience, within the last two years, performing standard body piercing services on a form prescribed by the Agency; or

(6) Submit affidavit of licensure pursuant to OAR 331-030-0040.

(7) For the purpose of this rule training or experience includes attendance or participation at an instructional program presented, recognized, or under the sponsorship of any permanently organized institution, agency, or professional organization or association recognized by the Agency.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-900-0050

Standard Body Piercing Supervisor

(1) An approved supervisor may supervise one standard body piercing trainee per shift.

(2) An approved supervisor must exercise management, guidance, and control over the activities of the standard body piercing trainee and must exercise professional judgment and be responsible for all matters relative to the standard body piercing.

(3) Supervisors must document work done by the standard body piercing trainee on a form prescribed by the Agency.

(4) An approved supervisor must notify the Agency in writing within five calendar days if a standard body piercing trainee is no longer being supervised, and must provide the number of hours of training completed on a form prescribed by the Agency.

(5) Notwithstanding any other disciplinary actions, an approved supervisor's authorization to supervise may be withdrawn by the Agency for providing incomplete or inadequate training or falsifying documentation.

(6) Supervisors must provide direct supervision to standard body piercing trainees.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12

331-900-0055

Requirements for Standard Body Piercing Supervisor

To be an approved supervisor for a standard body piercing trainee an individual must:

(1) Submit a completed form prescribed by the Agency, which must contain the information listed in OAR 331-030-0000;

(2) Hold an active, body piercing license issued prior to January 1, 2012 or a standard body piercing license issued after January 1, 2012, with no current or pending disciplinary action;

(3) Submit proof of having been actively practicing any combination of body piercing experience prior to January 1, 2012, or standard body piercing experience after January 1, 2012, for at least five years prior to submitting application on a form prescribed by the Agency;

(4) Submit proof of current cardiopulmonary resuscitation and basic first aid training from an Agency approved provider;

(5) Submit proof of current blood borne pathogens training from an Agency approved provider; and

(6) Have passed an Agency approved written and practical examination for standard body piercing in accordance with OAR 331-900-0060(3) and (4).

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12

331-900-0060

Approved Body Piercing Examinations

The Agency has approved the following examinations for body piercing:

(1) Oregon client care written examination;

(2) Oregon safety, sanitation and infection control written examination;

(3) Oregon standard body piercing written examination;

(4) Oregon standard body piercing practical examination;

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12

331-900-0065

General Body Piercing Examination Information

(1) To be eligible for examination, an applicant must meet identification requirements listed under OAR 331-030-0000.

(2) The examination is administered in English only, unless an agency approved testing contractor or vendor provides the examination in languages other than English.

(3) Examination candidates may be electronically monitored during the course of testing.

(4) Examination candidates must adhere to the maximum time allowance for each section of the examination, as established by the Agency.

(5) Taking notes, textbooks or notebooks into the examination area is prohibited.

(6) Electronic equipment and communication devices, such as personal computers, pagers and cellular telephones or any other devices deemed inappropriate by the agency, are prohibited in the examination area.

(7) Candidate conduct that interferes with the examination may result in the candidate's disqualification during or after the examination, the candidate's examination being deemed invalid, and forfeiture of the candidate's examination fees. Such conduct includes but is not limited to:

(a) Directly or indirectly giving, receiving, soliciting, and attempting to give, receive or solicit aid during the examination process;

(b) Violations of subsections (6), (7), or (8) of this rule;

(c) Removing or attempting to remove any examination-related information, notes or materials from the examination site;

(d) Failing to follow directions relative to the conduct of the examination; and

(e) Exhibiting behavior that impedes the normal progress of the examination.

(8) If the candidate is disqualified from taking the examination or the candidate's examination is deemed invalid for reasons under subsection (7) of this rule, the candidate may be required to reapply, submit additional examination fees, and request in writing to schedule a new examination date, before being considered for another examination opportunity.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415
Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35
Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12

331-900-0070

Written Examination Retake Requirements

(1) Notwithstanding OAR 331-900-0060(1)(a) and (b) failed sections of the written examination may be retaken as follows:

(a) After first failed attempt — applicant may not retake for seven calendar days;

(b) After second failed attempt — applicant may not retake for seven calendar days;

(c) After third failed attempt — applicant may not retake for 30 calendar days, must pay all additional fees and must submit one of the following:

(A) An official transcript certifying completion of an additional 100 hours of instruction in theory, focused on the approved curriculum outlined in OAR 331-900-0005 from a career school licensed under 345 on a form prescribed by the agency; or

(B) Documentation from an Agency approved supervisor certifying completion of an additional 100 hours of training in theory, focused on the approved curriculum outlined in OAR 331-900-0005 on a form prescribed by the Agency.

(d) After fourth failed attempt — applicant may not retake for seven calendar days;

(e) After fifth failed attempt — applicant may not retake for seven calendar days;

(f) After sixth failed attempt — applicant may not retake for 30 calendar days, must pay all additional fees and must submit one of the following:

(A) An official transcript certifying completion of an additional 100 hours of instruction in theory, focused on the approved curriculum outlined in OAR 331-900-0005 from a career school licensed under 345 on a form prescribed by the Agency; or

(B) Documentation from an Agency approved supervisor certifying completion of an additional 100 hours of training in theory, focused on the approved curriculum outlined in OAR 331-900-0005 on a form prescribed by the Agency.

(g) After seventh failed attempt — ability to retake, requirements for retake, or both will be determined by the Agency on a case-by-case basis.

(2) Applicants retaking the examination must meet the requirements under OAR 331-030-0000.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415
Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35
Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-900-0075

Practical Examination Retake Requirements

(1) Failed practical examinations may be retaken at a date and time determined by the Agency. Applicants retaking a failed practical must notify the Agency within 30 days before the next scheduled examination date and pay all examination fees

(2) Applicants who fail to pass the practical examination for standard body piercing after three attempts (initial examination plus two retakes) may not retake an examination for 30 calendar days, must pay all additional fees and must submit one of the following:

(a) An official transcript certifying completion of an additional 100 hours of instruction in theory, focused on the approved curriculum outlined in OAR 331-900-0005 from a career school licensed under 345 on a form prescribed by the Agency; or

(b) Documentation from an Agency approved supervisor certifying completion of an additional 100 hours of training in theory, focused on the approved curriculum outlined in OAR 331-900-0005 on a form prescribed by the Agency.

(3) After the fourth failed attempt — ability to retake, requirements for retake, or both will be determined by the Agency on a case-by-case basis.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415
Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35
Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12

331-900-0080

Renewal of a Standard Body Piercing License

(1) A licensee is subject to the provisions of OAR chapter 331, division 30 regarding the renewal of a license and provisions regarding authorization to practice, identification, and requirements for issuance of a duplicate license.

(2) LICENSE RENEWAL: To avoid delinquency penalties, a standard body piercing license renewal must be made prior to the license entering inactive status. The licensee must submit the following:

(a) Renewal application form;

(b) Payment of required renewal fee pursuant to 331-940-0000;

(c) Attestation of having obtained required annual continuing education under OAR 331-900-0085, on a form prescribed by the agency. Continuing education is required whether the license is current or inactive;

(d) Attestation of current certification in cardiopulmonary resuscitation from an Agency approved provider;

(e) Attestation of current first aid training by an Agency approved provider; and

(f) Attestation of current certification in blood borne pathogens training from an Agency approved provider.

(3) INACTIVE LICENSE RENEWAL: A standard body piercing license may be inactive for up to three years. If a license is inactive the licensee is not authorized to practice. When renewing a license after entering inactive status, the licensee holder must submit the following:

(a) Renewal application form;

(b) Payment of delinquency and license fees pursuant to OAR 331-940-0000;

(c) Attestation of having obtained required annual continuing education under OAR 331-900-0090 on a form prescribed by the Agency. Continuing education is required whether the license is current or inactive;

(d) Attestation of current certification in cardiopulmonary resuscitation from an Agency approved provider;

(e) Attestation of current first aid training by an Agency approved provider; and

(f) Attestation of current certification in blood borne pathogens training from an Agency approved provider.

(4) EXPIRED LICENSE: A standard body piercing license that has been inactive for more than three years is expired and the license holder must reapply and meet the requirements listed in OAR 331-900-0035.

(5) LICENSE RENEWAL — STANDARD BODY PIERCERS LICENSED PRIOR TO JANUARY 1, 2012. In addition to other requirements of this rule, for the first license renewal after the effective date of this rule, an individual originally licensed prior to January 1, 2012 to practice body piercing, including earlobe piercing technician registrations, must:

(a) Submit passing score of an agency approved written examination in accordance with OAR 331-900-0060(1)(c);

(b) Submit passing score of an Agency approved practical examination in accordance with OAR 331-900-0060(1)(d);

(c) Licensed standard body piercers are only required to pass the Board approved written and practical examination one time unless the license becomes expired.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415
 Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35
 Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12

331-900-0085

Continuing Education for Standard Body Piercing License

A standard body piercing license holder must comply with the following continuing education requirements:

(1) Complete 10 clock hours of satisfactory continuing education every year.

(2) Satisfactory continuing education courses must fit into the approved course of study outlined in OAR 331-900-0005, and must be obtained as follows:

(a) Five hours must involve participation or attendance at an instructional program presented, recognized, or under the auspices of any permanently organized institution, agency, or completion and certification by an approved national home study organization; and

(b) Five hours may be self-study which may include the following:

(A) Correspondence courses including online courses;

(B) Review of publications, textbooks, printed material, or audio cassette(s);

(C) Viewing of films, videos, or slides;

(3) A licensee must report compliance with the continuing education requirement through attestation on the license renewal document. Licensees will be subject to the provisions of OAR 331-900-0090 pertaining to periodic audit of continuing education.

(4) Hours of continuing education, in excess of the requirement for renewal will not be carried forward.

(5) Continuing education requirements must be met every year, even if the license is inactive or suspended.

(6) A licensee must maintain proof of continuing education for five years following the date of the continuing education hours obtained, for auditing purposes.

(7) A licensee may carry up to 8 continuing education hours forward to the next renewal cycle.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12; HLA 15-2012(Temp), f. & cert. ef. 10-15-12 thru 4-12-13

331-900-0090

Continuing Education: Audit, Required Documentation and Sanctions

(1) The Agency will audit a select percentage of licenses to verify compliance with continuing education requirements.

(2) Licensees notified of selection for audit of continuing education attestation must submit to the agency, within 30 calendar days from the date of notification, satisfactory evidence of participation in required continuing education in accordance with OAR 331-900-0085.

(3) Documentation of attendance at a program or course provided by the sponsor must include:

(a) Name of sponsoring institution/association or organization;

(b) Title of presentation and description of content;

(c) Name of instructor or presenter;

(d) Date of attendance and duration in hours;

(e) Course agenda;

(f) Official transcript, diploma, certificate, statement or affidavit from the sponsor, attesting to attendance.

(4) Documentation substantiating the completion of continuing education through self-study must show a direct relation to subjects outlined in OAR 331-900-0005, be submitted on forms provided by the agency and include the following:

(a) Name of sponsor or source, type of study, description of content, date of completion and duration in clock hours;

(b) Name of approved correspondence courses or national home study issues;

(c) Name of publications, textbooks, printed material or audio-cassette's, including date of publication, publisher, and ISBN issued.

(d) Name of films, videos, or slides, including date of production, name of sponsor or producer and catalog number.

(5) If documentation of continuing education is invalid or incomplete, the licensee must correct the deficiency within 30 calendar days from the date of notice. Failure to correct the deficiency within the prescribed time constitutes grounds for disciplinary action.

(6) Misrepresentation of continuing education or failing to meet continuing education requirements or documentation may result in disciplinary action, which may include, but is not limited to assessment of a civil penalty and suspension or revocation of the license.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-900-0095

Earlobe Piercing Practice Standards and Prohibitions

(1) A temporary earlobe piercing license holder must:

(a) Use an earlobe piercing system that pierces an individual's earlobe by use of a sterile, encapsulated single-use stud with clasp.

(b) Use an earlobe piercing system made of non absorbent or non porous material which can be cleaned and disinfected according to manufacturer's instructions.

(c) Use single-use prepackaged sterilized ear piercing studs for each client.

(d) Store new or sterilized ear piercing systems separately from used or soiled instruments.

(e) Disinfect all parts of the piercing gun with a high-level disinfectant

(2) A temporary earlobe piercer may only pierce with an earlobe piercing system; use of a needle is prohibited.

(3) Earlobe piercing system may only be used to pierce the earlobe. Use of an earlobe piercing system on other parts of the body or ear is prohibited.

(4) Piercing with a manual loaded spring operated ear piercing system is prohibited.

(5) Piercing the earlobe with any type of piercing gun which does not use the pre-sterilized encapsulated stud and clasp system is prohibited.

(6) Earlobe Piercing is prohibited:

(a) On a person under 18 years of age unless the requirements of OAR 331-900-0099 are met.

(b) On a person who shows signs of being inebriated or appears to be incapacitated by the use of alcohol or drugs;

(c) On a person who shows signs of recent intravenous drug use; and

(d) On a person with sunburn or other skin diseases or disorders of the skin such as open lesions, rashes, wounds, puncture marks in areas of treatment.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-900-0097

General Standards for Temporary Earlobe Body Piercing

(1) The cleanliness of any common in a facility is the responsibility of each license holder. All license holders may be cited for violations found in the common area.

(2) A temporary earlobe piercing licensee licensed to perform earlobe piercing services or a licensed facility owner must:

(a) Use and maintain appropriate equipment and instruments for providing services in a field of practice at the place of business;

(b) Use equipment and instruments in a manner described in the manufacturer's instructions which is consistent with the manufacturer's intended use of the device by the FDA;

(c) Use equipment and instruments that are not prohibited for use in a field of practice by the Agency or the FDA;

(d) Ensure a high-level disinfectant is used in accordance with manufacturer's instructions to disinfect surfaces where services are performed.

(e) Ensure chemicals are stored in labeled, closed containers.
(f) Ensure that single-use disposable paper products and protective gloves are used for each client. Use of towels and linens are prohibited.

(g) Ensure lavatories located within the facility are kept clean and in good working order at all times. Air blowers within lavatories can be substituted for disposable hand towels.

(h) Ensure all waste material related to a service in a field of practice be deposited in a covered container following service for each client.

(i) Ensure pets or other animals not be permitted in the business facility. This prohibition does not apply to service animals recognized by the American with Disabilities Act or to fish in aquariums or non-poisonous reptiles in terrariums.

(j) Ensure all disinfecting solutions or agents be kept at adequate strengths to maintain effectiveness, be free of foreign material and be available for immediate use at all times the facility is open for business.

(k) Ensure waste disposed of in receptacles located in non-service areas is limited to materials, which are not practice-related or used in the performance of any client services.

(l) Ensure all waste items that come in direct contact with the client's skin that cannot be cleaned and disinfected must be disposed of utilizing a "double bagging" technique: which means the waste must be completely enclosed inside a discarded glove or disposed of in a closed plastic bag that is separate from the garbage liners. The waste must be disposed of in a covered waste receptacle immediately after use.

(m) Ensure disposable sharp objects that come in contact with blood and/or body fluids must be disposed of in a sharps container.

(n) Adhere to all Centers for Disease Control and Prevention, Standard Precautions.

(3) A temporary earlobe piercing licensee must wear eye goggles, shields or a mask if spattering is possible while providing services.

(4) All substances shall be dispensed from containers in a manner to prevent contamination of the unused portion. Single use tubes or containers and applicators shall be discarded following the service.

(5) A temporary earlobe piercing licensee is permitted to have hot and cold running water within a restroom as part of surrounding premises or adjacent to the facility.

(6) Cross contaminating from touch or air particulates in any procedure area which comes in direct contact with client is prohibited.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 10-2012, f. & cert. ef. 6-25-12

331-900-0098

Standards for Client Services for Temporary Earlobe Piercing Licensees

(1) A temporary earlobe piercing licensee must observe and adhere to the following hand washing and disposable glove standards when servicing clients:

(a) **HAND WASHING:** Hands must be washed or treated with an antibacterial hand sanitizer before and after treatment of each client, and before putting on disposable gloves and immediately after disposable gloves are removed;

(b) Hand washing must include thoroughly washing the hands in warm, running water with liquid soap using friction on all surfaces of the hands and wrists, then rinsing hands and drying hands with a clean, disposable paper towel, or by using an antibacterial hand sanitizer by using friction on all surfaces of the hands and wrists. Use of bar soap is prohibited.

(2) A temporary earlobe piercing licensee must observe and adhere to the following protective disposable glove standards when servicing clients:

(a) **PROTECTIVE DISPOSABLE GLOVES:** A new pair of disposable gloves must be worn during the treatment of each client;

(b) Hands must be washed in accordance with hand washing instructions listed in Subsection (1) of this rule before putting on disposable gloves and immediately after disposable gloves are removed;

(c) When a treatment session is interrupted disposable gloves must be removed and discarded. Hand washing instructions listed in

Subsection (1) of this rule must be followed and a new pair of gloves put on when returning to the earlobe piercing service area.

(d) When a licensee leaves the earlobe piercing procedure area in the middle of a earlobe piercing procedure, gloves must be removed before leaving the procedure area, hand washing instructions listed in Subsection (1) of this rule must be followed and a new pair of gloves put on when returning to the procedure area.

(e) Disposable gloves must be removed and discarded before leaving the area where earlobe piercing services are performed.

(f) Torn or perforated gloves must be removed immediately, and hand washing instructions listed in Subsection (1) of this rule must be followed and gloves changed following hand washing.

(g) The use of disposable gloves does not preclude or substitute for hand washing instructions listed in subsection (1) of this rule.

(3) Disposable gloves must be worn during pre-cleaning, cleaning, rinsing, disinfecting and drying of equipment and instruments;

(4) A client's skin must be thoroughly cleaned with an antiseptic solution.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 10-2012, f. & cert. ef. 6-25-12; HLA 15-2012(Temp), f. & cert. ef. 10-15-12 thru 4-12-13

331-900-0099

Client Records and Information for Temporary Earlobe Piercing Licensees

(1) A temporary earlobe piercing licensee is responsible for maintaining and keeping copies of all client records. If client records are maintained by the facility the facility owner must provide the licensee with copies of those client records upon request. The record must include the following for each client:

(a) Name, address, telephone number and date of birth of client;

(b) Date of each service;

(c) Name and license number of the licensee providing service;

(d) Special instructions or notations relating to the client's medical or skin conditions including but not limited to diabetes, cold sores and fever blisters, psoriasis or eczema, pregnancy or breast-feeding/nursing.

(e) Complete list of the client's sensitivities to medicines or topical solutions;

(f) History of the client's bleeding disorders;

(g) Description of complications during procedure(s);

(h) Signature from the client that they have received the following information in writing and verbally:

(A) All information related to the body piercing service including possible reactions, side effects and potential complications of the service and consent to obtaining the body piercing service; and

(B) Information listed in OAR 331-900-0110 regarding informed consent for certain standard body piercing procedures.

(C) After care instructions including care following service, possible side effects and complications and restrictions.

(i) Signature from the client that they have been informed, both verbally and in writing, of all information related to the earlobe piercing services including possible reactions, side effects and potential complications of the service and consent to obtaining the earlobe piercing service; and

(j) The licensee must obtain proof of age or consent consisting of one of the following:

(A) If the client is of over 18, a copy of a government issued photographic identification. A copy of the government issued photographic identification must be included in the client record;

(B) If the client is a minor written parental or legal guardian consent is required. The written parental or legal guardian consent must be submitted to the licensee by the parent or legal guardian prior to piercing the minor. The consenting parent or legal guardian must be 18 years of age and present government issued photographic identification at time of written consent. A copy of the government issued photographic identification must be included in the client record.

(C) If the client is an emancipated minor, copies of legal court documents proving emancipation and government issued photographic identification is required.

(2) A licensee may obtain advice from physicians regarding medical information needed to safeguard client and licensee. Advice from the physician must be documented in the client record.

(3) For the purpose of (1) and (2) of this rule records must be kept at facility premises for a minimum of three years and must be made immediately available to the agency upon request.

(4) Client records must be typed or printed in a legible format. Client records, which are not readable by the Agency, will be treated as incomplete.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 10-2012, f. & cert. ef. 6-25-12

331-900-0100

Standard Body Piercing Practice Standards and Prohibitions

(1) Piercing is prohibited:

(a) On a person under 18 years of age unless the requirements of OAR 331-900-0130 are met.

(b) On the genital or nipple of a person under the age of 18 regardless of parental consent.

(c) On testes, deep shaft (corpus cavernosa), uvula, eyelids and sub-clavicle;

(d) On a person who shows signs of being inebriated or appears to be incapacitated by the use of alcohol or drugs;

(e) On a person who shows signs of recent intravenous drug use; and

(f) On a person with sunburn or other skin diseases or disorders of the skin such as open lesions, rashes, wounds, puncture marks in areas of treatment.

(2) Use of piercing guns is limited to piercing of the earlobe exclusively. No other part of the body or ear shall be pierced by use of a piercing gun.

(3) Piercing with a manual loaded spring operated piercing gun is prohibited.

(4) Piercing the earlobe with any type of piercing gun which does not use a pre-sterilized encapsulated stud and clasp system is prohibited.

(5) The Agency adopts the Association of Professional Piercers 2005 Procedure Manual by reference which must be used by licensees as a standard of care for body piercing best practices. The procedure manual can be located at <http://www.safepiercing.org/publications/procedure-manual/>

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-900-0105

Initial Jewelry for Standard Body Piercing

(1) All standard body piercers must meet the following jewelry grade standards for initial piercings:

(a) Surgical steel that is ASTM F-138 compliant or ISO 5832-1 compliant, ISO 10993-(6,10 or 11) compliant, or ECC (European Economic Community) Nickel Directive compliant;

(b) Implant certified titanium (Ti6Al4V ELI) that is ASTM F-136 compliant or ISO 5832-3 compliant, or commercially pure titanium that is ASTM F-67 compliant;

(c) Niobium;

(d) White or yellow gold that is 14k or higher, nickel-free, and solid (no gold plated, gold-filled, or gold overlay/vermeil);

(e) Platinum;

(f) Biocompatible polymers (plastics) including Tygon Medical Surgical Tubing 5-50HL or 5-54HL, PTFE (Teflon), Bioplast™ or any new polymer products that are USP VI compliant;

(g) Glass — Fused quartz glass, lead-free borosilicate, or lead-free soda-lime glass;

(h) Any other material that the APP determines to be appropriate for use in an initial piercing;

(i) Threaded jewelry must be internally threaded and all surfaces and ends must be free of nicks, scratches, burrs and polishing compounds.

(2) A licensee must have on the facility premises a “Mill Test Certificate” that provides evidence of a specific grade of metal with a code designation from the International Society for Testing and Materials Standard or the International Organization for Standardization or other documentation approved by the agency.

(3) Jewelry used during earlobe piercing services defined under OAR 331-900-0000 for an initial earlobe piercing is not required to meet the jewelry grade standards of this rule.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 15-2012(Temp), f. & cert. ef. 10-15-12 thru 4-12-13

331-900-0110

Informed Consent for Certain Standard Body Piercing Procedures

(1) A standard body piercer must provide information prescribed by the Agency to the client, regarding the following procedures:

(a) Nape piercing;

(b) Single point piercing; and

(c) General information regarding standard body piercing.

(2) Informed consent documents for standard body piercing procedures are published on the Agency’s website at <http://www.oregon.gov/OHLA/BAP/forms.shtml>.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-900-0115

General Standards for Standard Body Piercing

(1) The cleanliness of any common in a facility is the responsibility of each license holder. All license holders may be cited for violations found in the common area.

(2) An individual licensed to perform services in a field of practice or a licensed facility owner must:

(a) Use and maintain appropriate equipment and instruments for providing services in a field of practice at the place of business;

(b) Use equipment and instruments in a manner described in the manufacturer’s instructions which is consistent with the manufacturer’s intended use of the device by the FDA;

(c) Use equipment and instruments that are not prohibited for use in a field of practice by the Agency or the FDA;

(d) Ensure a high-level disinfectant is used in accordance with manufacturer’s instructions to disinfect surfaces where services are performed.

(e) Ensure chemicals are stored in labeled, closed containers.

(f) Ensure that single-use disposable paper products, single-use needles, sterilized jewelry and protective gloves are used for each client. Use of towels and linens are prohibited.

(g) Have unrestricted access or availability to a sink with hot and cold running water, as part of surrounding premises or adjacent to the facility but separate from a restroom.

(h) Ensure lavatories located within the facility are kept clean and in good working order at all times. Air blowers within lavatories can be substituted for disposable hand towels.

(i) Ensure all waste material related to a service in a field of practice be deposited in a covered container following service for each client.

(j) Ensure pets or other animals not be permitted in the business facility. This prohibition does not apply to service animals recognized by the American with Disabilities Act or to fish in aquariums or non-poisonous reptiles in terrariums.

(k) Ensure all disinfecting solutions or agents be kept at adequate strengths to maintain effectiveness, be free of foreign material and be available for immediate use at all times the facility is open for business.

(l) Ensure waste disposed of in receptacles located in non-service areas is limited to materials, which are not practice-related or used in the performance of any client services.

(m) Ensure all waste items that come in direct contact with the client's skin that cannot be cleaned and sterilized must be disposed of utilizing a "double bagging" technique: which means the waste must be completely enclosed inside a discarded glove or disposed of in a closed plastic bag that is separate from the garbage liners. The waste must be disposed of in a covered waste receptacle immediately after use.

(n) Ensure disposable sharp objects that come in contact with blood and/or body fluids must be disposed of in a sharps container.

(o) Adhere to all Centers for Disease Control and Prevention, Standard Precautions.

(p) Ensure that all instruments that come in direct contact with client's skin are handled using gloves.

(q) Ensure that all jewelry used for initial piercings is sterilized before use on a client in accordance with OAR 331-900-0125.

(3) A licensee must wear eye goggles, shields or a mask if splattering is possible while providing services.

(4) All substances must be dispensed from containers in a manner to prevent contamination of the unused portion. Single use tubes or containers and applicators shall be discarded following the service.

(5) Cross contaminating from touch or air particulates in any procedure area which comes in direct contact with client is prohibited.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 10-2012, f. & cert. ef. 6-25-12

331-900-0120

Standards for Client Services for Standard Body Piercing

(1) A licensee must wash hands in accordance with Subsection (2) of this rule:

(a) Prior to donning gloves to set-up of instruments used for conducting body piercing procedures;

(b) Immediately prior to donning gloves to perform a body piercing procedure;

(c) Immediately after removing gloves at the conclusion of performing a body piercing procedure and after removing gloves at the conclusion of procedures performed in the sterilization area;

(d) When leaving the work area;

(e) When coming in contact with blood or bodily fluids;

(f) Before and after performing the following acts not limited to eating, drinking, smoking, applying lip cosmetics or lip balm, handling contact lenses, or using the bathroom; or

(g) When hands are visibly soiled.

(2) Hand washing must include thoroughly washing the hands in warm, running water with liquid soap using friction on all surfaces of the hands and wrists, then rinsing hands and drying hands with a clean, disposable paper towel, or by using an antibacterial hand sanitizer by using friction on all surfaces of the hands and wrists.

(3) A new pair of disposable gloves must be worn during the treatment of each client;

(4) A minimum of one pair of disposable gloves must be used for each of the following stages of the body piercing procedure:

(a) Set-up of instruments used for conducting body piercing procedures and skin preparation of the body piercing procedure area;

(b) The body piercing procedure and post-procedure teardown; or

(c) Cleaning and disinfection of the procedure area after each use or between clients.

(5) Once gloves have been removed, they must be disposed of immediately and hand washing instructions listed in Subsection (2) of this rule must be followed.

(6) Torn or perforated gloves must be removed immediately, and hand washing instructions listed in Subsection (2) of this rule must be followed and gloves changed following hand washing.

(7) Disposable gloves must be removed before leaving the area where body piercing procedures are performed.

(8) When a licensee leaves the body piercing procedure area in the middle of a body piercing procedure, gloves must be removed before leaving the procedure area, hand washing instructions listed in Subsection (2) of this rule must be followed and a new pair of gloves put on when returning to the procedure area.

(9) The use of disposable gloves does not preclude or substitute for hand washing instructions listed in subsection (2) of this rule.

(10) A client's skin must be thoroughly cleaned with an antiseptic solution.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 10-2012, f. & cert. ef. 6-25-12

331-900-00125

Approved Sterilization Standards for Standard Body

(1) Needles must be single use, used on one client, then properly disposed of in a approved sharps container defined under OAR 331-900-0000.

(2) All non-sterilized instruments or reusable instruments that come in direct contact with a client's skin or are exposed to blood or bodily fluid must be cleaned and sterilized before use on a client or re-use on another client.

(3) New gloves must be worn during any cleaning or sterilization procedure.

(4) The cleaning and sterilization process listed in subsection (5) of this rule is not required if single-use prepackaged sterilized instruments, obtained from suppliers or manufacturers are used.

(5) Approved cleaning and sterilization process for non-sterilized instruments or reusable instruments includes the following ordered method after each use:

(a) Clean non-sterilized instruments or reusable instruments by manually brushing or swabbing visible foreign matter and rinsing the instruments with warm water and an appropriate detergent solution to remove blood and bodily fluids;

(b) Clean non-sterilized instruments or reusable instruments must be rinsed and placed in an ultrasonic cleaner filled with an appropriate ultrasonic solution including but not limited to an enzymatic cleaner. The ultrasonic unit must be used according to the manufacturer's instructions. The ultrasonic unit must operate at 40 to 60 kilohertz. All hinged instruments (including but not limited to piercing forceps) must be in the open position. The ultrasonic cleaner must remain covered when in use;

(c) Remove non-sterilized instruments or reusable instruments from the ultrasonic unit. All instruments must be rinsed, air dried, and individually packaged in sterilization pouches that includes use of a chemical indicator strip to assure sufficient temperature during each sterilization cycle, the date the sterilization was performed must be applied to the sterilization pouch;

(d) Individually packaged non-sterilized instruments or reusable instruments must be sterilized by using an autoclave sterilizer, steam or chemical, registered and listed with the FDA;

(e) A steam sterilization integrator must be used to monitor the essential conditions of steam sterilization for each autoclaved load or cycle. Results must be recorded in a log book for each sterilization cycle. Each steam sterilization integrator must indicate the date the sterilization cycle took place. Steam sterilization integrators must be kept for a minimum of sixty days.

(f) After sterilization, the sterilized instruments must be stored in a dry, disinfected, closed cabinet or other tightly-covered container reserved for the storage of such instruments.

(6) Use of a biological monitoring system ("spore tests") must be done at least once a month, verified through an independent laboratory, to assure all microorganisms have been destroyed and sterilization achieved.

(7) The ultrasonic unit listed in subsection (5)(c) of this rule must be used, cleaned, and maintained in accordance with manufacturer's instructions and a copy of the manufacturer's recommended procedures for the operation of the ultrasonic unit must be kept on file at the body art facility.

(8) All sterilization pouches with indicator strips listed in subsection (5)(d) of this rule must contain a chemical/temperature and/or humidity sensitive tapes, strips or pellets for monitoring each sterilization cycle.

(9) Sterilization pouches with indicator strips listed in subsection (5)(c) of this rule and steam sterilization integrators listed in (5)(e) of this rule must be available at all times for inspection by the Agency.

(10) Biological spore test results listed in subsection (6) of this rule must be immediately available at all times for inspection by the Agency and kept at facility premises for a minimum of two years.

(11) The autoclave listed in subsection (5)(e) must be used, cleaned, and maintained in accordance with manufacturer's instructions and a copy of the manufacturer's recommended procedures for the operation of the autoclave must be kept on file at the body art facility.

(12) The expiration date for sterilized instruments is one year from the date of sterilization unless the integrity of the package is compromised.

(13) Sterilized instruments may not be used if the package integrity has been breached, is wet or stained, or the expiration date has exceeded without first meeting the requirements listed in Subsection (5) of this rule.

(14) All sterilized instruments used in body piercing procedures must remain stored in sterile packages and in a dry, disinfected, closed cabinet or other tightly-covered container reserved for the storage of such instruments until just prior to the performance of a body piercing procedure.

(15) If a biological spore test listed in subsection (6) of this rule, result is positive, a licensee must discontinue the use of that sterilizer (autoclave) until it has been serviced and a negative spore test has been recorded before putting that sterilizer back into service. Until a negative spore test has been received, the licensee must:

(a) Use an alternative sterilizer (autoclave);

(b) Use only sterilized instruments that have a sterilization date on or before the date before the last negative spore test was recorded; or

(c) Use only single use instruments.

(16) Following a negative spore test instruments which were sterilized following the receipt of the negative spore test must be repackaged and sterilized pursuant to subsection (5) of this rule, before use.

(17) Following a negative spore test the licensee or facility must contact all clients in writing who may have received services prior to receiving the negative spore test results.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690, 405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 10-2012, f. & cert. ef. 6-25-12

331-900-0130

Client Records and Information for Standard Body Piercing

(1) A licensee is responsible for maintaining and keeping copies of all client records. If client records are maintained by the facility the facility owner must provide the licensee with copies of those client records upon request. The record must include the following for each client:

(a) Name, address, telephone number and date of birth of client;

(b) Date of each service, procedure location on the body and type of service performed on client;

(c) Name and license number of the licensee providing service;

(d) Special instructions or notations relating to the client's medical or skin conditions including but not limited to diabetes, cold sores and fever blisters, psoriasis or eczema, pregnancy or breast-feeding/nursing.

(e) Complete list of the client's sensitivities to medicines or topical solutions;

(f) History of the client's bleeding disorders;

(g) Type of jewelry;

(h) Description of complications during procedure(s);

(i) Signature from the client that they have received the following information in writing and verbally:

(A) All information related to the body piercing service including possible reactions, side effects and potential complications of the service and consent to obtaining the body piercing service; and

(B) Information listed in OAR 331-900-0110 regarding informed consent for certain standard body piercing procedures.

(C) After care instructions including care following service, possible side effects and complications and restrictions.

(j) The licensee must obtain proof of age or consent consisting of one of the following:

(A) If the client is of over 18, a copy of a government issued photographic identification. A copy of the government issued photographic identification must be included in the client record;

(B) If the client is a minor written parental or legal guardian consent is required. The written parental or legal guardian consent must be submitted to the licensee by the parent or legal guardian prior to piercing the minor. The consenting parent or legal guardian must be 18 years of age and present government issued photographic identification at time of written consent. A copy of the government issued photographic identification must be included in the client record.

(C) If the client is an emancipated minor, copies of legal court documents proving emancipation and government issued photographic identification is required.

(2) A licensee may obtain advice from physicians regarding medical information needed to safeguard client and licensee. Advice from the physician must be documented in the client record.

(3) For the purpose of (1) and (2) of this rule records must be maintained at facility premises for a minimum of three years and must be made immediately available to the agency upon request.

(4) Client records must be typed or printed in a legible format. Client records, which are not readable by the Agency, will be treated as incomplete.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690, 405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 10-2012, f. & cert. ef. 6-25-12

DIVISION 905

SPECIALITY BODY PIERCING

331-905-0000

Specialty Body Piercing Definitions

The following definitions apply to OAR chapter 331, division 900:

(1) "Affidavit of Licensure" has the meaning set forth in OAR 331-030-0040.

(2) "Agency" means the Oregon Health Licensing Agency.

(3) "APP" means Association of Professional Piercers.

(4) "Body piercing" has the definition set forth in ORS 690.350.

(5) "Direct supervision" means the supervisor or instructor is present in the facility and actively involved in direct oversight and training of students.

(6) "EPA" means United States Environmental Protection Agency.

(7) "FDA" means Food and Drug Administration.

(8) "Field of practice" has the definition set forth in ORS 690.350.

(9) "High-level disinfectant" means a chemical agent, registered with the EPA, which has demonstrated tuberculocidal activity.

(10) "Instruments" means equipment used during body piercing services. Types of instruments include but are not limited to needles, forceps, hemostats, tweezers, and jewelry.

(11) "Official transcript" means:

(a) An original document authorized by the appropriate office in the Oregon Department of Education and certified by a career school licensed under ORS chapter 345 indicating applicant identity information, field of practice(s) enrolled under, specific hour requirements for each field of practice if applicable, enrollment information and a signature by an authorized representative on file with the Agency. Original documents must be submitted directly to the Agency from the educational institution by United States Postal Service mail or other recognized mail service providers in a sealed envelope; or

(b) A document authorized by the appropriate office in the Oregon Department of Education and certified by a career school licensed under ORS chapter 345 providing applicant identity information, field(s) of practice studied and completed, specific hour requirements for each field of practice if applicable, enrollment information and a signature by an authorized representative on file with the Agency. Non-original documents shall only be accepted when and in the manner approved by the Agency.

(12) "Practitioner" means a person licensed to perform services included within a field of practice.

(13) “Sharps container” means a puncture-resistant, leak-proof container that can be closed for handling, storage, transportation, and disposal. The container must be labeled with the “Biohazard” symbol.

(14) “Specialty level one genital piercing” includes the following:

(a) Male genital piercings including the scrotum, frenum, foreskin, or the perineum behind the scrotum, and the piercing of the penis through the urethra, perineum behind the scrotum (Guiche) and exiting on the underside of the penis (called a “Prince Albert”); and

(b) Female genital piercing including the labia majora, labia minora, piercings of the clitoral hood, and perineum between the vagina and the anus (fourchette).

(15) “Specialty level two genital piercing” includes the following:

(a) Male genital piercings including: a vertical piercing through the glans of the penis (called an “apadravya”), horizontal piercing through the glans of the penis (called an “ampallang”), a piercing through the corona or ridge of the glans of the penis (called a “dydoe”), a piercing of the penis entering through the urethra and exiting on the upper side of the penis (called a “reverse Prince Albert”); and

(b) Female genital piercings including the clitoris, a piercing in which jewelry is inserted below the hood behind the clitoris (called a “triangle”), and a piercing of the vagina through the urethra and exiting on the upper side of the vagina (called a “Princess Albertina”).

Stat. Auth.: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, & 345

Stats. Implemented: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, OL 2011, Ch. 346, Sec. 22 & 35

Hist.: HLA 14-2011(Temp), f. 12-30-11, cert. ef. 1-1-12 thru 6-25-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-905-0005

Specialty Level One Genital Piercing Education or Training

Beginning on January 1, 2013, all education curriculum or training for specialty level one genital piercing must meet requirements set forth by the Oregon Health Licensing Agency prior to beginning training or education. The theory portion of the curriculum or training must be completed prior to the practical portion of the curriculum or training.

(1) Education Requirements for Specialty Level One Genital Piercing Student: An individual must obtain a standard body piercing license prior to beginning education for specialty level one genital piercing. Specialty level one genital piercing career school course of study must include 46 hours of theory and practical education. The education must include a minimum of 10 hours of theory instruction, 36 hours of practical experience and a minimum of 36 practical operations.

(2) The 36 practical operations required must include:

(a) 6 practical operations observed by the student which must include a minimum of 3 female genital piercings and a minimum of 3 male genital piercings. Out of the 6 practical operations the student must observe at least 4 different piercing procedures listed in subsection (5) of this rule.

(b) 10 practical operations in which the student participated which must include a minimum of 3 female genital piercings and a minimum of 3 male genital piercings. Out of the 10 practical operations the student must participate in at least 4 different piercing procedures listed in subsection (5) of this rule; and

(c) 20 practical operations performed by the student under direct supervision, but without assistance which must include a minimum of 6 female genital piercings and a minimum of 6 male genital piercings. Out of the 20 practical operations the student must perform at least 4 different piercing procedures listed in subsection (5) of this rule.

(3) The 10 hours of theory instruction required must include:

(a) Male and female genital anatomy and physiology: 6 hours

(b) Ethics and legalities related to genital piercing: 1 hour;

(c) Client consultation related to genital piercing: 1 hour;

(d) Jewelry and equipment: 1.5 hour; and

(e) Oregon laws and rules: .5 hour.

(4) The 36 hours of required practical training must include client consultation, cleaning, disinfection and sterilization.

(5) The 36 piercings included in the practical training must include at least 3 different piercing procedures listed in Subsection (a)

through (i) below and must include content listed in subsection (4) of this rule:

(a) Scrotum;

(b) Frenum;

(c) Foreskin;

(d) Perineum behind the scrotum (Guiche);

(e) Piercing of the penis through the urethra and exiting on the underside of the penis (Prince Albert);

(f) Labia majora;

(g) Labia minora;

(h) Piercing of the perineum between the vagina and the anus (fourchette);

(i) Piercing of the clitoral hood;

(6) As part of the approved course of study, all hours of theory must be completed prior to practical work being performed.

(7) Education must be conducted by a Department of Education, Private Career School licensed instructor who holds an active specialty level one genital piercing license.

(8) A Department of Education, Private Career School licensed instructor must provide direct supervision of practical training on a one-to-one student/teacher ratio for students performing practical training while working on the general public.

(9) Supervised Training Requirements for Specialty Level One Genital Piercing Trainee: An individual must obtain a standard body piercing license prior to beginning training for specialty level one genital piercing. Specialty level one genital piercing training program must include 46 hours of theory and practical training. The training must include a minimum of 10 hours of theory instruction, 36 hours of practical training and a minimum of 36 practical operations.

(10) The 36 practical operations required must include:

(a) 6 practical operations observed by the trainee which must include a minimum of 3 female genital piercings and a minimum of 3 male genital piercings. Out of the 6 practical operations the trainee must observe at least 4 different piercing procedures listed in subsection (13) of this rule.

(b) 10 practical operations in which the trainee participated which must include a minimum of 3 female genital piercings and a minimum of 3 male genital piercings. Out of the 10 practical operations the trainee must participate in at least 4 different piercing procedures listed in subsection (13) of this rule; and

(c) 20 practical operations performed by the trainee under direct supervision, but without assistance which must include a minimum of 3 female genital piercings and a minimum of 3 male genital piercings. Out of the 20 practical operations the trainee must perform at least 3 different piercing procedures listed in subsection (13) of this rule.

(11) The 10 hours of theory instruction required must include:

(a) Male and female genital anatomy and physiology: 6 hours

(b) Ethics and legalities related to genital piercing: 1 hour;

(c) Client consultation related to genital piercing: 1 hour;

(d) Jewelry and equipment: 1.5 hour; and

(e) Oregon laws and rules: .5 hour.

(12) The 36 hours of required practical training must include client consultation, cleaning, disinfection and sterilization.

(13) The 36 piercings included in the practical training must include at least 3 different piercing procedures listed in Subsection (a) through (i) below and must include content listed in subsection (12) of this rule:

(a) Scrotum;

(b) Frenum;

(c) Foreskin;

(d) Perineum behind the scrotum (Guiche);

(e) Piercing of the penis through the urethra and exiting on the underside of the penis (Prince Albert);

(f) Labia majora;

(g) Labia minora;

(h) Piercing of the perineum between the vagina and the anus (fourchette);

(i) Piercing of the clitoral hood;

(14) As part of the approved training, all hours of theory must be completed prior to practical work being performed.

(15) Training must be completed in no less than two months from the date the Agency issues a specialty level one genital piercing trainee license.

(16) A supervisor must provide direct supervision of practical training on a one-to-one trainee to trainer ratio for trainees performing practical training while the trainee is working on the general public.

Stat. Auth.: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, & 345
Stats. Implemented: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, OL 2011, Ch. 346, Sec. 22 & 35
Hist.: HLA 14-2011(Temp), f. 12-30-11, cert. ef. 1-1-12 thru 6-25-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-905-0010

Specialty Level Two Genital Piercing Education or Training

Beginning on January 1, 2013, all education curriculum or training for specialty level two genital piercing must meet requirements set forth by the Oregon Health Licensing Agency prior to beginning training or education. The theory portion of the curriculum or training must be completed prior to the practical portion of the curriculum or training.

(1) Education Requirements for Specialty Level Two Genital Piercing Student: An individual must obtain a standard body and specialty level one genital piercing license prior to beginning education for specialty level two genital piercing. Specialty level two genital piercing career school course of study must include 31 hours of theory and practical education. The education must include a minimum of 5 hours of theory instruction, 26 hours of practical experience and a minimum of 26 practical operations.

(2) The 26 practical operations required must include:

(a) 6 practical operations observed by the student. Out of the 6 practical operations the student must observe at least 3 different piercing procedures listed in subsection (5) of this rule;

(b) 10 practical operations in which the student participated. Out of the 10 practical operations the student must participate in at least 3 different piercing procedures listed in subsection (5) of this rule; and

(c) 10 practical operations performed by the student under direct supervision, but without assistance. Out of the 10 practical operations the student must perform at least 3 different piercing procedures listed in subsection (5) of this rule.

(3) The 5 hours of theory instruction required must include:

(a) Male and female genital anatomy and physiology: 3.5 hours

(b) Client consultation related to genital piercing: .5 hours;

(c) Jewelry and equipment: .5 hours; and

(d) Oregon laws and rules: .5 hours.

(4) The 26 hours of practice required must include client consultation, cleaning, disinfection and sterilization.

(5) The 26 piercings included in the practical training must include at least 3 different piercing procedures listed in Subsection (a) through (g) below and must include content listed in subsection (4) of this rule:

(a) Piercing of the penis entering through the urethra and exiting on the upper side of the penis (reverse prince albert);

(b) Piercing through the corona or ridge of the glans of the penis (dydoe);

(c) Horizontal piercing through the glans of the penis (ampallang);

(d) Vertical piercing through the glans of the penis (apadravya);

(e) Clitoris;

(f) Piercing in which jewelry is inserted below the hood behind the clitoris (triangle);

(g) Any piercing of the female genitals through the urethra; and

(h) Any other genital piercings not listed in specialty level one genital piercing.

(6) As part of the approved course of study, all hours of theory must be completed prior to practical work being performed.

(7) Education must be conducted by a Department of Education, Private Career School licensed instructor who holds an active specialty level two genital piercing license.

(8) A Department of Education, Private Career School licensed instructor must provide direct supervision of practical training on a one-to-one student/teacher ratio for students performing practical training while working on the general public.

(9) Supervised Training Requirements for Temporary Specialty Level Two Genital Piercing Licensee: An individual must obtain a standard body and specialty level one genital piercing license prior to

beginning training for specialty level two genital piercing. Specialty level two genital piercing training program must include 31 hours of theory and practical training. The training must include a minimum of 5 hours of theory instruction, 26 hours of practical training and a minimum of 26 practical operations.

(10) The 26 practical operations required must include:

(a) 6 practical operations observed by the student Out of the 6 practical operations the student must observe at least 3 different piercing procedures listed in subsection (13) of this rule;

(b) 10 practical operations in which the student participated. Out of the 10 practical operations the student must participate in at least 3 different piercing procedures listed in subsection (13) of this rule; and

(c) 10 practical operations performed by the student under direct supervision, but without assistance. Out of the 10 practical operations the student must perform at least 3 different piercing procedures listed in subsection (13) of this rule.

(11) The 5 hours of theory instruction required must include:

(a) Male and female genital anatomy and physiology: 3.5 hours

(b) Client consultation related to genital piercing: .5 hours;

(c) Jewelry and equipment: .5 hours; and

(d) Oregon laws and rules: .5 hours.

(12) The 26 hours of practice required must include client consultation, cleaning, disinfection and sterilization.

(13) The 26 piercings included in the practical training must include at least three different piercing procedures listed in Subsection (a) through (g) below and must include content listed in subsection (12) of this rule:

(a) Piercing of the penis entering through the urethra and exiting on the upper side of the penis (reverse prince albert);

(b) Piercing through the corona or ridge of the glans of the penis (dydoe);

(c) Horizontal piercing through the glans of the penis (ampallang);

(d) Vertical piercing through the glans of the penis (apadravya);

(e) Clitoris;

(f) Piercing in which jewelry is inserted below the hood behind the clitoris (triangle);

(g) Any piercing of the female genitals through the urethra; and

(h) Any other genital piercings not listed in specialty level one genital piercing.

(14) As part of the approved training, all hours of theory must be completed prior to practical work being performed.

(15) Training must be completed in no less than 2 months from the date the Agency issues a specialty level two genital piercing temporary license.

(16) A supervisor must provide direct supervision of practical training on a one-to-one trainee to trainer ratio for trainees performing practical training while the trainee is working on the general public.

Stat. Auth.: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, & 345
Stats. Implemented: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, OL 2011, Ch. 346, Sec. 22 & 35
Hist.: HLA 14-2011(Temp), f. 12-30-11, cert. ef. 1-1-12 thru 6-25-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-905-0011

Specialty Level One Genital Piercing Trainee

(1) A specialty level one genital piercing trainee license is valid for one year, and may not be renewed.

(2) A specialty level one genital piercing trainee license holder may perform services defined under OAR 331-905-0000(14).

(3) A specialty level one genital piercing trainee license holder, licensed under ORS 690.365, may provide specialty level one genital piercing services under the direct supervision of an Agency approved supervisor pursuant OAR 331-905-0052 and 331-905-0055.

(4) Supervisors of a specialty level one genital piercing trainee must adhere to OAR 331-905-0055.

(5) A specialty level one genital piercing license holder must adhere to all standards within OAR 331-905-0090, 331-905-0095, 331-905-0100, 331-905-0105, 331-905-110, 331-905-0115, 331-905-0120 and all applicable rules listed in OAR 331 division 925.

Stat. Auth.: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, & 345

Stats. Implemented: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, OL 2011, Ch. 346, Sec. 22 & 35
Hist.: HLA 10-2012, f. & cert. ef. 6-25-12

331-905-0012

Application Requirements for Specialty Level One Genital Piercing Trainee License

An individual applying for a Specialty Level One Genital Trainee License must:

- (1) Meet the requirements of OAR 331 division 30;
- (2) Submit a completed application form prescribed by the Agency, which must contain the information listed in OAR 331-030-0000 and be accompanied by payment of the required application fees;
- (3) Submit proof of being 18 years of age, documentation may include identification listed under OAR 331-030-0000;
- (4) Submit proof of having a high school diploma or equivalent;
- (5) Submit proof of current cardiopulmonary resuscitation and basic first aid training from an Agency approved provider;
- (6) Submit proof of current blood borne pathogens training from an Agency approved provider;
- (7) Submit proof of having a current standard body piercing license which is active with no current or pending disciplinary action; and

- (8) Pay applicable licensing fees.

Stat. Auth.: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, & 345

Stats. Implemented: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415

Hist.: HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-905-0013

Specialty Level Two Genital Piercing Trainee

(1) A specialty level two genital piercing trainee license is valid for one year, and may not be renewed.

(2) A specialty level two genital piercing trainee license holder may perform services defined under OAR 331-905-0000(15).

(3) A specialty level two genital piercing trainee license holder, licensed under ORS 690.365, may provide specialty level two genital piercing services under the direct supervision of an Agency approved supervisor pursuant OAR 331-905-0058 and 331-905-0060.

(4) Supervisors of a specialty level two genital piercing trainee must adhere to OAR 331-905-0060.

(5) A specialty level two genital piercing license holder must adhere to all standards within OAR 331-905-0090, 331-905-0095, 331-905-0100, 331-905-0105, 331-905-110, 331-905-0115, 331-905-0120 and all applicable rules listed in OAR 331 division 925

Stat. Auth.: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, & 345

Stats. Implemented: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, OL 2011, Ch. 346, Sec. 22 & 35

Hist.: HLA 10-2012, f. & cert. ef. 6-25-12

331-905-0014

Application Requirements for Specialty Level Two Genital Piercing Trainee License

An individual applying for a Specialty Level Two Genital Trainee License must:

- (1) Meet the requirements of OAR 331 division 30;
- (2) Submit a completed application form prescribed by the Agency, which must contain the information listed in OAR 331-030-0000 and be accompanied by payment of the required application fees;
- (3) Submit proof of being 18 years of age, documentation may include identification listed under OAR 331-030-0000;
- (4) Submit proof of having a high school diploma or equivalent;
- (5) Submit proof of current cardiopulmonary resuscitation and basic first aid training from an Agency approved provider;
- (6) Submit proof of current blood borne pathogens training from an Agency approved provider;
- (7) Submit proof of having a current specialty level one genital piercing license which is active with no current or pending disciplinary action; and

- (8) Pay applicable licensing fees.

Stat. Auth.: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, & 345

Stats. Implemented: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415

Hist.: HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-905-0015

Specialty Level One Genital Piercing License Issued to a Body Piercer Licensed Prior to January 1, 2012

(1) A specialty level one genital piercing license holder may perform services standard body piercing services defined under OAR 331-905-0000.

(2) A specialty level one genital piercing license holder may perform services defined under OAR 331-905-0000(14).

(3) A specialty level one genital piercing license is valid for one year and becomes inactive on the last day of the month one year from the date of issuance.

(4) A specialty level one genital piercing license holder must adhere to all standards within OAR 331-905-0090, 331-905-0095, 331-905-0100, 331-905-0105, 331-905-110, 331-905-0115, 331-905-0120 and all applicable rules listed in OAR 331 division 925

Stat. Auth.: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, & 345

Stats. Implemented: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, OL 2011, Ch. 346, Sec. 22 & 35

Hist.: HLA 14-2011(Temp), f. 12-30-11, cert. ef. 1-1-12 thru 6-25-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-905-0020

Application Requirements for Specialty Level One Genital Piercer Licensed as Body Piercer Prior to January 1, 2012

(1) An individual applying for licensure who obtained an Oregon body piercing license before January 1, 2012, to qualify for a specialty level one genital piercing license, that individual must:

- (a) Meet the requirements of OAR 331 division 30;
- (b) Submit a completed application form prescribed by the Agency, which must contain the information listed in OAR 331-030-0000 and be accompanied by payment of the required application fees;
- (c) Submit proof of current cardiopulmonary resuscitation and basic first aid training from an Agency approved provider;
- (d) Submit proof of current blood borne pathogens training from an Agency approved provider;
- (e) Submit proof of being 18 years of age documentation may include identification listed under OAR 331-030-0000;
- (f) Submit proof of having a high school diploma or equivalent;
- (g) Submit proof of having a current standard body piercing license which is active with no current or pending disciplinary action;
- (h) Submit copies of client records demonstrating proof of having successfully performed a minimum of 36 specialty level one genital piercings defined under OAR 331-905-0005(5). Client records must demonstrate proof of having performed at least 3 different piercing procedures listed in OAR 331-905-0005(5); and
- (i) Pay all licensing fees.

(2) Experience claimed under subsections (1)(g) and (1)(h) of this rule is subject to independent verification by the Agency.

Stat. Auth.: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, & 345

Stats. Implemented: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, OL 2011, Ch. 346, Sec. 22 & 35

Hist.: HLA 14-2011(Temp), f. 12-30-11, cert. ef. 1-1-12 thru 6-25-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-905-0025

Specialty Level Two Genital Piercing License Issued to a Body Piercer Licensed Prior to January 1, 2012

(1) A specialty level two genital piercing license holder may perform services defined under OAR 331-905-0000(15).

(2) A specialty level two genital piercing license is valid for one year and becomes inactive on the last day of the month one year from the date of issuance.

(3) A specialty level two genital piercing license holder must adhere to all standards within OAR 331-905-0090, 331-905-0095, 331-905-0100, 331-905-0105, 331-905-110, 331-905-0115, 331-905-0120 and all applicable rules listed in OAR 331 division 925

Stat. Auth.: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, & 345

Stats. Implemented: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, OL 2011, Ch. 346, Sec. 22 & 35

Hist.: HLA 14-2011(Temp), f. 12-30-11, cert. ef. 1-1-12 thru 6-25-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-905-0030

Application Requirements for Specialty Level Two Genital Piercer Licensed as a Body Piercer Prior to January 1, 2012

(1) An individual applying for licensure who obtained an Oregon body piercing license before January 1, 2012, to qualify for a specialty level two genital piercing license, that individual must:

- (a) Meet the requirements of OAR 331 division 30;
- (b) Submit a completed application form prescribed by the Agency, which must contain the information listed in OAR 331-030-0000 and be accompanied by payment of the required application fees;
- (c) Submit proof of current cardiopulmonary resuscitation and basic first aid training from an Agency approved provider;
- (d) Submit proof of current blood borne pathogens training from an Agency approved provider;
- (e) Submit proof of being 18 years of age documentation may include identification listed under OAR 331-030-0000;
- (f) Submit proof of having a high school diploma or equivalent;
- (g) Submit proof of having a current specialty level one genital piercing license which is active with no current or pending disciplinary action;

(h) Submit copies of client records demonstrating proof of having successfully performed a minimum of 26 specialty level two genital piercings defined under OAR 331-905-0010(5). Client records must demonstrate proof of having performed at least 3 different piercing procedures listed in OAR 331-905-0010(5); and

(i) Pay all licensing fees.

(2) Experience claimed under subsections (1)(g) and (1)(h) of this rule is subject to independent verification by the Agency.

Stat. Auth.: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, & 345

Stats. Implemented: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, OL 2011, Ch. 346, Sec. 22 & 35

Hist.: HLA 14-2011(Temp), f. 12-30-11, cert. ef. 1-1-12 thru 6-25-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-905-0035

Specialty Level One Genital Piercing License

(1) A specialty level one genital piercing license pursuant ORS 676.615 may perform standard body piercing services defined under OAR 331-900-0000.

(2) A specialty level one genital piercing license may perform services defined under OAR 331-905-0000(14).

(3) A specialty level one genital piercing license is valid for one year and becomes inactive on the last day of the month one year from the date of issuance.

(4) A specialty level one genital license holder must adhere to all standards within OAR 331-905-0090, 331-905-0095, 331-905-0100, 331-905-0105, 331-905-110, 331-905-0115, 331-905-0120 and all applicable rules listed in OAR 331 division 925

Stat. Auth.: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, & 345

Stats. Implemented: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, OL 2011, Ch. 346, Sec. 22 & 35

Hist.: HLA 14-2011(Temp), f. 12-30-11, cert. ef. 1-1-12 thru 6-25-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-905-0040

Application Requirements for Specialty Level One Genital Piercing License

(1) An individual applying for licensure to practice specialty level one genital piercing must:

- (a) Meet the requirements of OAR 331 division 30;
- (b) Submit a completed application form prescribed by the Agency, which must contain the information listed in OAR 331-030-0000 and be accompanied by payment of the required application fees;
- (c) Submit proof of current cardiopulmonary resuscitation and basic first aid training from an Agency approved provider;
- (d) Submit proof of current blood borne pathogens training from an Agency approved provider;
- (e) Submit proof of being 18 years of age documentation may include identification listed under OAR 331-030-0000;
- (f) Submit proof of having a high school diploma or equivalent;

(g) Provide documentation of completing a qualifying pathway.

(2) License Pathway 1 — Graduate from an Oregon Licensed Career School for Specialty Level One Genital Piercing:

(a) Submit official transcript from a specialty level one genital piercing career school under ORS 345 and showing proof of completion of required specialty level two genital piercing curriculum as approved by the Agency under OAR 331-905-0005(1) through (8);

(b) Pay examination fees;

(c) Submit passing score of an Agency approved written examination under OAR 331-905-0070(1) and (3) within two years before the date of application;

(d) Upon passage of all required examinations and before issuance of license, applicant must pay all license fees.

(3) License Pathway 2 — Qualification through Specialty Level One Genital Piercing Temporary License:

(a) Submit documentation approved by the Agency showing proof of having completed required specialty level one genital training listed under OAR 331-905-0005 (9) through (16), and verified by a supervisor approved under OAR 331-905-0055, on a form prescribed by the Agency;

(b) Pay examination fees;

(c) Submit passing score of an Agency approved written examination under OAR 331-905-0070(1) and (3) within two years before the date of application;

(d) Upon passage of all required examinations and before issuance of license, applicant must pay all license fees.

Stat. Auth.: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, & 345

Stats. Implemented: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, OL 2011, Ch. 346, Sec. 22 & 35

Hist.: HLA 14-2011(Temp), f. 12-30-11, cert. ef. 1-1-12 thru 6-25-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-905-0045

Specialty Level Two Genital Piercing License

(1) A specialty level two genital piercing license may perform standard body piercings services defined under OAR 331-900-0000.

(2) A specialty level two genital piercing license may perform specialty level one genital piercing services defined under OAR 331-905-0000(14).

(3) A specialty level two genital piercing license may perform specialty level two genital piercing services defined under OAR 331-905-0000(15).

(4) A specialty level two genital piercing license is valid for one year and becomes inactive on the last day of the month one year from the date of issuance.

(5) A specialty level two genital license holder must adhere to all standards within OAR 331-905-0090, 331-905-0095, 331-905-0100, 331-905-0105, 331-905-110, 331-905-0115, 331-905-0120 and all applicable rules listed in OAR 331 division 925.

Stat. Auth.: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, & 345

Stats. Implemented: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, OL 2011, Ch. 346, Sec. 22 & 35

Hist.: HLA 14-2011(Temp), f. 12-30-11, cert. ef. 1-1-12 thru 6-25-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-905-0050

Application Requirements for Specialty Level Two Genital Piercing License

(1) An individual applying for licensure to practice specialty level two genital piercing must:

- (a) Meet the requirements of OAR 331 division 30;
- (b) Submit a completed application form prescribed by the Agency, which must contain the information listed in OAR 331-030-0000 and be accompanied by payment of the required application fees;
- (c) Submit proof of current cardiopulmonary resuscitation and basic first aid training from an Agency approved provider;
- (d) Submit proof of current blood borne pathogens training from an Agency approved provider;
- (e) Submit proof of being 18 years of age documentation may include identification listed under OAR 331-030-0000;
- (f) Submit proof of having a high school diploma or equivalent;
- (g) Provide documentation of completing a qualifying pathway;

(2) License Pathway 1 — Graduate from an Oregon Licensed Career School for Specialty Level Two Genital Piercing:

(a) Submit official transcript from a specialty level two genital piercing career school under ORS 345 and showing proof of completion of required specialty level two genital piercing curriculum as approved by the Agency under OAR 331-905-0010 (1) through (7);

(b) Pay examination fees;

(c) Submit passing score of an Agency approved written examination under OAR 331-905-0070(2) and (3) within two years before the date of application;

(d) Upon passage of all required examinations and before issuance of license, applicant must pay all license fees.

(3) License Pathway 2 — Qualification through Specialty Level Two Genital Piercing Temporary License:

(a) Submit documentation approved by the Agency showing proof of having completed required specialty level two genital training listed under OAR 331-905-0010(9) through (17), verified by a supervisor approved under to OAR 331-905-0060 on a form prescribed by the Agency;

(b) Pay examination fees;

(c) Submit passing score of an Agency approved written examination under OAR 331-905-0070(2) and (3) within two years before the date of application;

(d) Upon passage of all required examinations and before issuance of license, applicant must pay all license fees.

Stat. Auth.: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, & 345

Stats. Implemented: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, OL 2011, Ch. 346, Sec. 22 & 35
Hist.: HLA 14-2011(Temp), f. 12-30-11, cert. ef. 1-1-12 thru 6-25-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-905-0052

Specialty Level One Genital Piercing Supervisor

(1) An approved supervisor may supervise one specialty level one genital approved trainee per shift.

(2) An approved supervisor must exercise management, guidance, and control over the activities of the specialty level one genital piercing and must exercise professional judgment and be responsible for all matters relative to the specialty level one genital piercing trainee.

(3) Supervisors must document work done by the specialty level one genital piercing trainee on a form prescribed by the Agency.

(4) An approved supervisor must notify the Agency in writing within five calendar days if a specialty level one genital piercing trainee is no longer being supervised, and must provide the number of hours of training completed on a form prescribed by the Agency.

(5) Notwithstanding any other disciplinary actions, an approved supervisor's authorization to supervise may be withdrawn by the Agency for providing incomplete or inadequate training or falsifying documentation.

(6) Supervisors must provide direct supervision to specialty level one genital piercing trainees.

Stat. Auth.: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, & 345

Stats. Implemented: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, OL 2011, Ch. 346, Sec. 22 & 35
Hist.: HLA 10-2012, f. & cert. ef. 6-25-12

331-905-0055

Requirements for Specialty Level One Genital Piercing Supervisor

(1) To be an approved supervisor for a specialty level one genital piercing trainee an individual must:

(a) Submit a completed form prescribed by the Agency, which must contain the information listed in OAR 331-030-0000;

(b) Submit proof of having a specialty level one genital piercing license which is active with no current or pending disciplinary action;

(c) Submit proof of current cardiopulmonary resuscitation and basic first aid training from an Agency approved provider;

(d) Submit proof of current blood borne pathogens training from an Agency approved provider;

(e) Submit copies of client records demonstrating proof of having successfully performed a minimum of 40 of each specialty level one genital piercings defined under OAR 331-905-0000(14). Client records must demonstrate proof of having performed at least 3 different piercing procedures listed in OAR 331-905-0005(5); and

(f) Submit copies of client records demonstrating proof of having a minimum of two years of experience successfully performing the piercing procedures listed in paragraph (f) above;

(g) Provide a list of three professional references on a form prescribed by the Agency.

(2) Experience claimed under subsections (1)(e) and (1)(f) of this rule is subject to independent verification by the Agency.

(3) A specialty level one genital piercing supervisor must adhere to all standards within OAR 331-905-0090, 331-905-0095, 331-905-0100, 331-905-0105, 331-905-110, 331-905-0115, 331-905-0120 and all applicable rules listed in OAR 331 division 925

Stat. Auth.: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, & 345

Stats. Implemented: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, OL 2011, Ch. 346, Sec. 22 & 35
Hist.: HLA 14-2011(Temp), f. 12-30-11, cert. ef. 1-1-12 thru 6-25-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-905-0058

Specialty Level Two Genital Piercing Supervisor

(1) An approved supervisor may supervise one specialty level two genital trainee per shift.

(2) An approved supervisor must exercise management, guidance, and control over the activities of the specialty level two genital trainee and must exercise professional judgment and be responsible for all matters relative to the specialty level two genital piercing trainee.

(3) Supervisors must document work done by the specialty level two genital piercing trainee on a form prescribed by the Agency.

(4) An approved supervisor must notify the Agency in writing within five calendar days if a specialty level two genital piercing trainee is no longer being supervised, and must provide the number of hours of training completed on a form prescribed by the Agency.

(5) Notwithstanding any other disciplinary actions, an approved supervisor's authorization to supervise may be withdrawn by the Agency for providing incomplete or inadequate training or falsifying documentation.

(6) Supervisors must provide direct supervision to specialty level two genital piercing trainees.

Stat. Auth.: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, & 345

Stats. Implemented: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, OL 2011, Ch. 346, Sec. 22 & 35
Hist.: HLA 10-2012, f. & cert. ef. 6-25-12

331-905-0060

Requirements for Specialty Level Two Genital Piercing Supervisor

(1) To be an approved supervisor for a specialty level two genital piercing trainee an individual must:

(a) Submit a completed form prescribed by the Agency, which must contain the information listed in OAR 331-030-0000;

(b) Submit proof of having a standard body piercing license which is active with no current or pending disciplinary action;

(c) Submit proof of having a specialty level one genital piercing license which is active with no current or pending disciplinary action;

(d) Submit proof of having a specialty level two genital piercing license which is active with no current or pending disciplinary action;

(e) Submit proof of current cardiopulmonary resuscitation and basic first aid training from an Agency approved provider;

(f) Submit proof of current blood borne pathogens training from an Agency approved provider;

(g) Submit copies of client records demonstrating proof of having successfully performed a minimum of 40 of each specialty level two genital piercings defined under OAR 331-905-0000(15). Client records must demonstrate proof of having performed at least three different piercing procedures listed in OAR 331-905-0005(5); and

(h) Submit copies of client records demonstrating proof of having a minimum of two years of experience successfully performing the piercing procedures listed in paragraph (g) above;

(i) Provide a list of references on a form prescribed by the Agency.

(2) Experience claimed under subsections (1)(g) and (1)(h) of this rule is subject to independent verification by the Agency.

(3) A specialty level two genital piercing supervisor must adhere to all standards within OAR 331-905-0090, 331-905-0095, 331-905-0100, 331-905-0105, 331-905-110, 331-905-0115, 331-905-0120 and all applicable rules listed in OAR 331 division 925.

Stat. Auth.: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, & 345
 Stats. Implemented: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, OL 2011, Ch. 346, Sec. 22 & 35
 Hist.: HLA 14-2011(Temp), f. 12-30-11, cert. ef. 1-1-12 thru 6-25-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-905-0065

Informed Consent for Certain Body Piercing Procedures

(1) A specialty cheek piercer must provide information prescribed by the Agency to the client, regarding cheek piercing.

(2) A specialty level one genital piercer must provide information prescribed by the Agency to the client, regarding specialty level one genital piercings.

(3) A specialty level two genital piercer must provide information prescribed by the Agency to the client, regarding specialty level two genital piercings.

(4) Informed consent documents for body piercing procedures listed in Subsection (1), (2) and (3) of this rule is published on the Agency's website at <http://www.oregon.gov/OHLA/BAP/forms.shtml>.

(5) A specialty cheek piercer must disclose to each client receiving a specialty cheek piercing the number of cheek piercings in which the piercer has completed on clients and which the piercer can verify on a form prescribed by the Agency.

(6) A specialty level one genital piercer must disclose to each client receiving a specialty level one genital piercing the number of specific specialty level one genital piercings which the piercer has completed on clients and which the piercer can verify on a form prescribed by the Agency.

(7) A specialty level two genital piercer must disclose to each client receiving a specialty level two genital piercing the number of specific specialty level two genital piercings which the piercer has completed on clients and which the piercer can verify on a form prescribed by the Agency.

Stat. Auth.: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, & 345
 Stats. Implemented: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, OL 2011, Ch. 346, Sec. 22 & 35
 Hist.: HLA 14-2011(Temp), f. 12-30-11, cert. ef. 1-1-12 thru 6-25-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12

331-905-0070

Approved Specialty Body Piercing Examinations

The Agency has approved the following examinations for specialty body piercing:

- (1) Written specialty level one genital piercing examination;
- (2) Written specialty level two genital piercing examination; or
- (3) Oregon safety, sanitation and infection control written examination;

Stat. Auth.: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, & 345
 Stats. Implemented: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, OL 2011, Ch. 346, Sec. 22 & 35
 Hist.: HLA 10-2012, f. & cert. ef. 6-25-12

331-905-0075

General Specialty Body Piercing Examination Information

(1) To be eligible for examination, an applicant must meet identification requirements listed under OAR 331-030-0000.

(2) The examination is administered in English only, unless an agency approved testing contractor or vendor provides the examination in languages other than English.

(3) Examination candidates may be electronically monitored during the course of testing.

(4) Examination candidates must adhere to the maximum time allowance for each section of the examination, as established by the Agency.

(5) Taking notes, textbooks or notebooks into the examination area is prohibited.

(6) Electronic equipment and communication devices, such as personal computers, pagers and cellular telephones or any other devices deemed inappropriate by the agency, are prohibited in the examination area.

(7) Candidate conduct that interferes with the examination may result in the candidate's disqualification during or after the examination, the candidate's examination being deemed invalid, and forfeiture

of the candidate's examination fees. Such conduct includes but is not limited to:

(a) Directly or indirectly giving, receiving, soliciting, and attempting to give, receive or solicit aid during the examination process;

(b) Violations of subsections (6), (7), or (8) of this rule;

(c) Removing or attempting to remove any examination-related information, notes or materials from the examination site;

(d) Failing to follow directions relative to the conduct of the examination; and

(e) Exhibiting behavior that impedes the normal progress of the examination.

(8) If the candidate is disqualified from taking the examination or the candidate's examination is deemed invalid for reasons under subsection (7) of this rule, the candidate may be required to reapply, submit additional examination fees, and request in writing to schedule a new examination date, before being considered for another examination opportunity.

Stat. Auth.: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, & 345
 Stats. Implemented: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, OL 2011, Ch. 346, Sec. 22 & 35
 Hist.: HLA 10-2012, f. & cert. ef. 6-25-12

331-905-0080

Written Examination Retake Requirements

(1) Individuals may take failed sections of the written examination as follows:

(a) After first failed attempt — applicant may not retake for seven calendar days;

(b) After second failed attempt — applicant may not retake for seven calendar days;

(c) After third failed attempt — applicant may not retake for 30 calendar days, must pay all additional fees and must submit one of the following:

(A) An official transcript certifying completion of an additional 100 hours of instruction in theory, focused on the approved curriculum outlined in OAR 331-905-0003, 331-905-0005 or 331-905-0010 from a career school licensed under 345 on a form prescribed by the agency; or

(B) Documentation from an Agency approved supervisor certifying completion of an additional 100 hours of training in theory, focused on the approved curriculum outlined in OAR 331-905-0003, 331-905-0005 or 331-905-0010 on a form prescribed by the Agency.

(d) After fourth failed attempt — applicant may not retake for seven calendar days;

(e) After fifth failed attempt — applicant may not retake for seven calendar days;

(f) After sixth failed attempt — applicant may not retake for 30 calendar days, must pay all additional fees and must submit one of the following:

(A) An official transcript certifying completion of an additional 100 hours of instruction in theory, focused on the approved curriculum outlined in OAR 331-905-0003, 331-905-0005 or 331-905-0010 from a career school licensed under 345 on a form prescribed by the Agency; or

(B) Documentation from an Agency approved supervisor certifying completion of an additional 100 hours of training in theory, focused on the approved curriculum outlined in OAR 331-905-0003, 331-905-0005 or 331-905-0010 on a form prescribed by the Agency.

(g) After seventh failed attempt — ability to retake, requirements for retake, or both will be determined by the Agency on a case-by-case basis.

(2) Applicants retaking the examination must meet the requirements under OAR 331-030-0000.

Stat. Auth.: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, & 345
 Stats. Implemented: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, OL 2011, Ch. 346, Sec. 22 & 35
 Hist.: HLA 10-2012, f. & cert. ef. 6-25-12

331-905-0085

Renewal of a Specialty Level One Genital or Specialty Level Two Genital Piercing License

(1) A licensee is subject to the provisions of OAR chapter 331, division 30 regarding the renewal of a license and provisions regard-

ing authorization to practice, identification, and requirements for issuance of a duplicate license.

(2) **LICENSE RENEWAL:** To avoid delinquency penalties, specialty level one genital or specialty level two genital piercing license renewal must be made prior to the license entering inactive status. The licensee must submit the following:

- (a) Renewal application form;
- (b) Payment of required renewal fee pursuant to 331-940-0000;
- (c) Attestation of having obtained required annual continuing education under OAR 331-905-0090, on a form prescribed by the agency. Continuing education is required whether the license is current or inactive;
- (d) Attestation of current certification in cardiopulmonary resuscitation from an Agency approved provider;
- (e) Attestation of current first aid training by an Agency approved provider; and
- (f) Attestation of current certification in blood borne pathogens training from an Agency approved provider.

NOTE: A licensee is not required to renew the standard body piercing license if renewing a specialty level one genital or specialty level two genital piercing license.

NOTE: A licensee is not required to renew the specialty level one genital license if renewing the specialty level two genital piercing license.

(3) **INACTIVE LICENSE RENEWAL:** A specialty level one genital or specialty level two genital piercing license may be inactive for up to three years. If a license is inactive the licensee is not authorized to practice. When renewing a license after entering inactive status, the licensee holder must submit the following:

- (a) Renewal application form;
- (b) Payment of delinquency and license fees pursuant to OAR 331-940-0000;
- (c) Attestation of having obtained required annual continuing education under OAR 331-905-0090 on a form prescribed by the Agency. Continuing education is required whether the license is current or inactive;
- (d) Attestation of current certification in cardiopulmonary resuscitation from an Agency approved provider;
- (e) Attestation of current first aid training by an Agency approved provider; and
- (f) Attestation of current certification in blood borne pathogens training from an Agency approved provider.

(4) **EXPIRED LICENSE:** A specialty level one genital or specialty level two genital piercing license that has been inactive for more than three years is expired and the license holder must reapply and meet the requirements listed in OAR 331-905-0034, 331-905-0040 or 331-905-0050.

Stat. Auth.: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, & 345

Stats. Implemented: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, OL 2011, Ch. 346, Sec. 22 & 35

Hist.: HLA 10-2012, f. & cert. ef. 6-25-12

331-905-0090

Specialty Body Piercing Practice Standards and Prohibitions

- (1) Piercing is prohibited:
 - (a) On the genital or nipple of a person under the age of 18 regardless of parental consent.
 - (b) On testes, deep shaft (corpus cavernosa), uvula, eyelids and sub-clavicle;
 - (c) On a person who shows signs of being inebriated or appears to be incapacitated by the use of alcohol or drugs;
 - (d) On a person who shows signs of recent intravenous drug use;
 - (e) On a person with sunburn or other skin diseases or disorders of the skin such as open lesions, rashes, wounds, puncture marks in areas of treatment;
- (2) Use of piercing guns is limited to piercing of the earlobe exclusively. No other part of the body or ear shall be pierced by use of a piercing gun.
- (3) Piercing with a manual loaded spring operated piercing gun is prohibited.
- (4) Piercing the earlobe with any type of piercing gun which does not use a pre-sterilized encapsulated stud and clasp system is prohibited.
- (5) The Agency adopts the Association of Professional Piercers 2005 Procedure Manual by reference which must be used by licensees as a standard of care for body piercing best practices. The procedure

manual can be located at <http://www.safepiercing.org/publications/procedure-manual/>

Stat. Auth.: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, & 345

Stats. Implemented: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, OL 2011, Ch. 346, Sec. 22 & 35

Hist.: HLA 10-2012, f. & cert. ef. 6-25-12

331-905-0095

General Standards for Specialty Body Piercing

(1) The cleanliness of any common in a facility is the responsibility of each license holder. All license holders may be cited for violations found in the common area.

(2) An individual licensed to perform services in a field of practice or a licensed facility owner must:

- (a) Use and maintain appropriate equipment and instruments for providing services in a field of practice at the place of business;
- (b) Use equipment and instruments in a manner described in the manufacturer's instructions which is consistent with the manufacturer's intended use of the device by the FDA;
- (c) Use equipment and instruments that are not prohibited for use in a field of practice by the Agency or the FDA;
- (d) Ensure a high-level disinfectant is used in accordance with manufacturer's instructions to disinfect surfaces where services are performed.
- (e) Ensure chemicals are stored in labeled, closed containers.
- (f) Ensure that single-use disposable paper products, single-use needles, sterilized jewelry and protective gloves are used for each client. Use of towels and linens are prohibited.
- (g) Have unrestricted access or availability to a sink with hot and cold running water, as part of surrounding premises or adjacent to the facility but separate from a restroom.
- (h) Ensure lavatories located within the facility are kept clean and in good working order at all times. Air blowers within lavatories can be substituted for disposable hand towels.
- (i) Ensure all waste material related to a service in a field of practice be deposited in a covered container following service for each client.

(j) Ensure pets or other animals not be permitted in the business facility. This prohibition does not apply to service animals recognized by the American with Disabilities Act or to fish in aquariums or non-poisonous reptiles in terrariums.

(k) Ensure all disinfecting solutions or agents be kept at adequate strengths to maintain effectiveness, be free of foreign material and be available for immediate use at all times the facility is open for business.

(l) Ensure waste disposed of in receptacles located in non-service areas is limited to materials, which are not practice-related or used in the performance of any client services.

(m) Ensure all waste items that come in direct contact with the client's skin that cannot be cleaned and sterilized must be disposed of utilizing a "double bagging" technique: which means the waste must be completely enclosed inside a discarded glove or disposed of in a closed plastic bag that is separate from the garbage liners. The waste must be disposed of in a covered waste receptacle immediately after use.

(n) Ensure disposable sharp objects that come in contact with blood and/or body fluids must be disposed of in a sharps container.

(o) Adhere to all Centers for Disease Control and Prevention, Standard Precautions.

(p) Ensure that all instruments that come in direct contact with client's skin are handled using gloves.

(3) A licensee must wear eye goggles, shields or a mask if splattering is possible while providing services.

(4) All substances shall be dispensed from containers in a manner to prevent contamination of the unused portion. Single use tubes or containers and applicators shall be discarded following the service.

(5) Cross contaminating from touch or air particulates in any procedure area which comes in direct contact with client is prohibited.

Stat. Auth.: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, & 345

Stats Implemented: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, OL 2011, Ch. 346, Sec. 22 & 35

Hist.: HLA 10-2012, f. & cert. ef. 6-25-12; HLA 15-2012(Temp), f. & cert. ef. 10-15-12 thru 4-12-13

331-905-0100

Standards for Client Services for Specialty Body Piercing

(1) A licensee must wash hands in accordance with Subsection (2) of this rule:

(a) Prior to donning gloves to set-up of instruments used for conducting body piercing procedures;

(b) Immediately prior to donning gloves to perform a body piercing procedure;

(c) Immediately after removing gloves at the conclusion of performing a body piercing procedure and after removing gloves at the conclusion of procedures performed in the sterilization area;

(d) When leaving the work area;

(e) When coming in contact with blood or bodily fluids;

(f) Before and after performing the following acts not limited to eating, drinking, smoking, applying lip cosmetics or lip balm, handling contact lenses, or using the bathroom; or

(g) When hands are visibly soiled.

(2) Hand washing must include thoroughly washing the hands in warm, running water with liquid soap using friction on all surfaces of the hands and wrists, then rinsing hands and drying hands with a clean, disposable paper towel, or by using an antibacterial hand sanitizer by using friction on all surfaces of the hands and wrists.

(3) A new pair of disposable gloves must be worn during the treatment of each client;

(4) A minimum of one pair of disposable gloves must be used for each of the following stages of the body piercing procedure:

(a) Set-up of instruments used for conducting body piercing procedures and skin preparation of the body piercing procedure area;

(b) The body piercing procedure and post-procedure teardown;

or

(c) Cleaning and disinfection of the procedure area after each use or between clients.

(5) Once gloves have been removed, they must be disposed of immediately and hand washing instructions listed in Subsection (2) of this rule must be followed.

(6) Torn or perforated gloves must be removed immediately, and hand washing instructions listed in Subsection (2) of this rule must be followed and gloves changed following hand washing.

(7) Disposable gloves must be removed before leaving the area where body piercing procedures are performed.

(8) When a licensee leaves the body piercing procedure area in the middle of a body piercing procedure, gloves must be removed before leaving the procedure area, hand washing instructions listed in Subsection (2) of this rule must be followed and a new pair of gloves put on when returning to the procedure area.

(9) The use of disposable gloves does not preclude or substitute for hand washing instructions listed in subsection (2) of this rule.

(10) A client's skin must be thoroughly cleaned with an antiseptic solution.

Stat. Auth.: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, & 345

Stats. Implemented: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, OL 2011, Ch. 346, Sec. 22 & 35

Hist.: HLA 10-2012, f. & cert. ef. 6-25-12

331-905-0105

Approved Sterilization for Specialty Body Piercing

(1) Needles must be single use, used on one client, then properly disposed of in a approved sharps container defined under OAR 331-905-0000.

(2) All non-sterilized instruments or reusable instruments that come in direct contact with a client's skin or are exposed to blood or bodily fluid must be cleaned and sterilized before use on a client or re-use on another client.

(3) New gloves must be worn during any sterilization procedure.

(4) The cleaning and sterilization process listed in subsection (5) of this rule is not required if single-use prepackaged sterilized instruments, obtained from suppliers or manufacturers are used.

(5) Approved cleaning and sterilization process for non-sterilized instruments or reusable instruments includes the following ordered method after each use:

(a) Clean non-sterilized instruments or reusable instruments by manually brushing or swabbing visible foreign matter and rinsing the instruments with warm water and an appropriate detergent solution to remove blood and bodily fluids;

(b) Clean non-sterilized instruments or reusable instruments must be rinsed and placed in an ultrasonic cleaner filled with an appropriate ultrasonic solution including but not limited to an enzymatic cleaner. The ultrasonic unit must be used according to the manufacturer's instructions. The ultrasonic unit must operate at 40 to 60 kilohertz. All hinged instruments (including but not limited to piercing forceps) must be in the open position. The ultrasonic cleaner must remain covered when in use;

(c) Remove non-sterilized instruments or reusable instruments from the ultrasonic unit. All instruments must be rinsed, air dried, and individually packaged in sterilization pouches that includes use of a chemical indicator strip to assure sufficient temperature during each sterilization cycle, the date the sterilization was performed must be applied to the sterilization pouch;

(d) Individually packaged non-sterilized instruments or reusable instruments must be sterilized by using an autoclave sterilizer, steam or chemical, registered and listed with the FDA;

(e) A steam sterilization integrator must be used to monitor the essential conditions of steam sterilization for each autoclaved load or cycle. Results must be recorded in a log book for each sterilization cycle. Each steam sterilization integrator must indicate the date the sterilization cycle took place.

(f) After sterilization, the sterilized instruments must be stored in a dry, disinfected, closed cabinet or other tightly-covered container reserved for the storage of such instruments.

(6) Use of a biological monitoring system ("spore tests") must be done at least once a month, verified through an independent laboratory, to assure all microorganisms have been destroyed and sterilization achieved.

(7) The ultrasonic unit listed in subsection (5)(b) of this rule must be used, cleaned, and maintained in accordance with manufacturer's instructions and a copy of the manufacturer's recommended procedures for the operation of the ultrasonic unit must be kept on file at the body art facility.

(8) All sterilization pouches with indicator strips listed in subsection (5)(c) of this rule must contain a chemical/temperature and/or humidity sensitive tapes, strips or pellets for monitoring each sterilization cycle.

(9) Sterilization pouches with indicator strips listed in subsection (5)(c) of this rule and steam sterilization integrators listed in (5)(e) of this rule must be available at all times for inspection by the Agency. Steam sterilization integrators must be kept for a minimum of sixty days.

(10) Biological spore test results listed in subsection (6) of this rule must be immediately available at all times for inspection by the Agency and kept at facility premises for a minimum of two years.

(11) The autoclave listed in subsection (5)(d) must be used, cleaned, and maintained in accordance with manufacturer's instructions and a copy of the manufacturer's recommended procedures for the operation of the autoclave must be kept on file at the body art facility.

(12) The expiration date for sterilized instruments is one year from the date of sterilization unless the integrity of the package is compromised.

(13) Sterilized instruments may not be used if the package integrity has been breached, is wet or stained, or the expiration date has exceeded without first meeting the requirements listed in Subsection (5) of this rule.

(14) All sterilized instruments used in body piercing procedures must remain stored in sterile packages and in a dry, disinfected, closed cabinet or other tightly-covered container reserved for the storage of such instruments until just prior to the performance of a body art procedure.

(15) If a spore test result listed in subsection (6) of this rule, is positive, a licensee must discontinue the use of that sterilizer (autoclave) until it has been serviced and a negative spore test has been recorded before putting that sterilizer back into service. Until a negative spore test has been received, the licensee must:

(a) Use an alternative sterilizer (autoclave);

(b) Use only sterilized instruments that have a sterilization date on or before the date before the last negative spore test was recorded; or

(c) Use only single use instruments.

(16) Following a negative spore test pursuant to subsection (6) of this rule, instruments which were sterilized following the receipt of the negative spore test must be repackaged and sterilized pursuant to subsection (5) of this rule, before use.

(17) Following a negative spore test to pursuant to subsection (6) of this rule the licensee or facility must contact all clients in writing who may have received services prior to receiving the negative spore test results.

Stat. Auth.: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, & 345

Stats. Implemented: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, OL 2011, Ch. 346, Sec. 22 & 35

Hist.: HLA 10-2012, f. & cert. ef. 6-25-12

331-905-0110

Client Records and Information for Specialty Body Piercing

(1) A licensee is responsible for maintaining and keeping copies of all client records. If client records are maintained by the facility the facility owner must provide the licensee with copies of those client records upon request. The record must include the following for each client:

- (a) Name, address, telephone number and date of birth of client;
- (b) Date of each service, procedure location on the body and type of service performed on client;
- (c) Name and license number of the licensee providing service;
- (d) Special instructions or notations relating to the client's medical or skin conditions including but not limited to diabetes, cold sores and fever blisters, psoriasis or eczema, pregnancy or breast-feeding/nursing.
- (e) Complete list of the client's sensitivities to medicines or topical solutions;
- (f) History of the client's bleeding disorders;
- (g) Type of jewelry;
- (h) Description of complications during procedure(s);
- (i) Signature from the client that they have received the following information in writing and verbally;

(A) All information related to the body piercing service including possible reactions, side effects and potential complications of the service and consent to obtaining the body piercing service; and

(B) Information listed in OAR 331-905-0065 regarding informed consent for specialty body piercing procedures.

(C) After care instructions including care following service, possible side effects and complications and restrictions.

(1) Proof of age or consent consisting of one of the following:

(A) If the client is of over 18, a copy of a government issued photographic identification. A copy of the government issued photographic identification must be included in the client record;

(B) If the client is a minor written parental or legal guardian consent is required. The written parental or legal guardian consent must be submitted to the licensee by the parent or legal guardian prior to piercing the minor. The consenting parent or legal guardian must be 18 years of age and present government issued photographic identification at time of written consent. A copy of the government issued photographic identification must be included in the client record.

(C) If the client is an emancipated minor, copies of legal court documents proving emancipation and government issued photographic identification is required.

(2) A licensee may obtain advice from physicians regarding medical information needed to safeguard client and licensee. Advice from the physician must be documented in the client record.

(3) For the purpose of (1) and (2) of this rule records must be maintained at facility premises for a minimum of three years and must be made immediately available to the agency upon request.

(4) Client records must be typed or printed in a legible format. Client records, which are not readable by the Agency, will be treated as incomplete.

Stat. Auth.: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, & 345

Stats. Implemented: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, OL 2011, Ch. 346, Sec. 22 & 35

Hist.: HLA 10-2012, f. & cert. ef. 6-25-12

331-905-0115

Informed Consent for Specialty Body Piercing Procedures

(1) A specialty level one genital piercer must provide information prescribed by the Agency to the client, regarding specialty level one genital piercings.

(2) A specialty level two genital piercer must provide information prescribed by the Agency to the client, regarding specialty level two genital piercings.

(3) Informed consent documents for certain body piercing procedures listed in Subsection (1) and (2) of this rule is published on the Agency's website at <http://www.oregon.gov/OHLA/BAP/forms.shtml>.

(4) A specialty level one genital piercer must disclose to each client receiving a specialty level one genital piercing the number of specific specialty level one genital piercings which the piercer has completed on clients and which the piercer can verify on a form prescribed by the Agency.

(5) A specialty level two genital piercer must disclose to each client receiving a specialty level two genital piercing the number of specific specialty level two genital piercings which the piercer has completed on clients and which the piercer can verify on a form prescribed by the Agency.

Stat. Auth.: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, & 345

Stats Implemented: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, OL 2011, Ch. 346, Sec. 22 & 35

Hist.: HLA 10-2012, f. & cert. ef. 6-25-12; HLA 15-2012(Temp), f. & cert. ef. 10-15-12 thru 4-12-13

331-905-0120

Initial Jewelry for Specialty Genital Piercing Services

(1) All standard body piercers must meet the following jewelry grade standards for initial piercings:

(a) Surgical steel that is ASTM F-138 compliant or ISO 5832-1 compliant, ISO 10993-(6, 10 or 11) compliant, or ECC (European Economic Community) Nickel Directive compliant;

(b) Implant certified titanium (Ti6Al4V ELI) that is ASTM F-136 compliant or ISO 5832-3 compliant, or commercially pure titanium that is ASTM F-67 compliant;

(c) Niobium;

(d) White or yellow gold that is 14k or higher, nickel-free, and solid (no gold plated, gold-filled, or gold overlay/vermeil);

(e) Platinum;

(f) Biocompatible polymers (plastics) including Tygon Medical Surgical Tubing 5-50HL or 5-54HL, PTFE (Teflon), Bioplast™ or any new polymer products that are USP VI compliant;

(g) Glass — Fused quartz glass, lead-free borosilicate, or lead-free soda-lime glass;

(h) Any other material that the APP determines to be appropriate for use in an initial piercing;

(i) Threaded jewelry must be internally threaded and all surfaces and ends must be free of nicks, scratches, burrs and polishing compounds.

(2) A licensee must have on the facility premises a "Mill Test Certificate" that provides evidence of a specific grade of metal with a code designation from the International Society for Testing and Materials Standard or the International Organization for Standardization or other documentation approved by the agency.

(3) Jewelry used for initial piercings must be sterilized before use on each client in accordance with OAR 331-905-0105.

Stat. Auth.: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, & 345

Stats Implemented: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, OL 2011, Ch. 346, Sec. 22 & 35

Hist.: HLA 10-2012, f. & cert. ef. 6-25-12; HLA 15-2012(Temp), f. & cert. ef. 10-15-12 thru 4-12-13

DIVISION 910

ELECTROLOGY

331-910-0000

Definitions

The following definitions apply to OAR chapter 331, division 910:

(1) "Affidavit of Licensure" has the meaning set forth in OAR 331-030-0040.

(2) "Agency" means the Oregon Health Licensing Agency.

(3) "Direct supervision" means the supervisor or instructor is present in the facility and actively involved in direct oversight and training of students.

(4) "EPA" means United States Environmental Protection Agency.

(5) "FDA" means Food and Drug Administration.

(6) "Field of practice" has the definition set forth in ORS 690.350.

(7) "High-level disinfectant" means a chemical agent, registered with the EPA, which has demonstrated tuberculocidal activity.

(8) "Instruments" means equipment used during electrology services. Types of instruments include but are not limited to needles (filaments) and tweezers.

(9) "Sharps container" means a puncture-resistant, leak-proof container that can be closed for handling, storage, transportation, and disposal. The container must be labeled with the "Biohazard" symbol.

(10) "Official transcript" means:

(a) An original document authorized by the appropriate office in the Oregon Department of Education and certified by a career school licensed under ORS 345 indicating applicant identity information, field of practice(s) enrolled under, specific hour requirements for each field of practice if applicable, enrollment information and a signature by an authorized representative on file with the Agency. Original documents must be submitted directly to the Agency from the educational institution by United States Postal Service mail or other recognized mail service providers in a sealed envelope; or

(b) A document authorized by the appropriate office in the Oregon Department of Education and certified by career school licensed under ORS 345 indicating applicant identity information, field of practice(s) enrolled under, specific hour requirements for each field of practice if applicable, enrollment information and a signature by an authorized representative on file with the Agency. Non-original documents shall only be accepted when, and in the manner, approved by the Agency

(11) "Practitioner" means a person licensed to perform services included within a field of practice.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-910-0005

Approved Course of Study for Electrology

To be approved by the agency, a course of study must include, at least 600 hours of training instruction. The course must include at least 235 hours of theory and at least 365 hours of practical experience in the following areas:

(1) Laws and rules: 15 hours of training in theory.

(2) Bacteriology: 20 hours of training in theory.

(3) Infection control and sterilization: 20 hours of training in theory and 15 hours of practical training.

(4) Anatomy and physiology: 20 hours of training in theory.

(5) Endocrinology: 20 hours of training in theory.

(6) Structure, dynamics and diseases of skin and hair: 30 hours of training in theory.

(7) Circulatory and nervous system: 20 hours of training in theory.

(8) Electricity: 15 hours of training in theory.

(9) Electrolysis (galvanic): 20 hours of training in theory and 115 hours of practical training.

(10) Thermolysis: 20 hours of training in theory and 115 hours of practical training.

(11) Combinations of electrolysis and thermolysis (blend): 20 hours of training in theory and 110 hours of practical training.

(12) Draping and positioning: 5 hours of training in theory and 5 hours of practical training.

(13) Professional ethics and business practices: 10 hours of training in theory and 5 hours of practical training.

(14) As part of the approved course of study, all hours of theory must be completed prior to practical work being performed on the general public.

(15) Training must be conducted by an Oregon licensed electrologist registered as a teacher by the Department of Education, Private Career Schools.

(16) A registered teacher must provide direct supervision of practical training on a one-to-one student/teacher ratio for students performing practical training while the student is working on the general public.

(17) For the purpose of this rule direct supervision means the teacher is present and actively involved in direct oversight and training of students.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12

331-910-0010

Electrology Temporary License

(1) An electrology temporary license pursuant to ORS 690.365 is a temporary license to perform electrology services on a limited basis, not to exceed 15 consecutive calendar days. A electrology temporary license holder;

(a) Must submit all requests to revive a license on a form prescribed by the Agency. Request to revive a license must be received at least 15 days before electrology services are provided unless otherwise approved by the Agency.

(b) Must submit all requests to revive a license on a form prescribed by the Agency and received 15 days before electrology services are provided unless otherwise approved by the Agency.

(c) Must submit notification of a change in work location at least 24 hours before services are performed on a form prescribed by the Agency; and

(d) Must work in a licensed facility.

(2) An electrology temporary license holder must adhere to standards within OAR 331-910-0065, 331-910-0070, 331-910-0075, 331-910-0080, 331-910-0085 and all applicable rules listed in OAR 331 division 925.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 2-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12; HLA 15-2012(Temp), f. & cert. ef. 10-15-12 thru 4-12-13

331-910-0015

Application Requirements for Electrology Temporary License

An individual applying for a Electrology Temporary License must:

(1) Meet the requirements of OAR 331 division 30;

(2) Submit a completed application form prescribed by the Agency, which must contain the information listed in OAR 331-030-0000 and be accompanied by payment of the required application fees and must be received at least 15 days before electrology services are provided to clients;

(3) Submit proof of being 18 years of age. Documentation may include identification listed under OAR 331-030-0000;

(4) Submit proof of having a high school diploma or equivalent;

(5) Submit proof of current training in blood-borne pathogens; and

(6) Attest to six months of training or experience, within the last two years, performing electrology on a form prescribed by the Agency; or

(7) Submit affidavit of licensure pursuant to OAR 331-030-0040.

(8) For the purpose of this rule training or experience includes attendance or participation at an instructional program presented, recognized, or under the sponsorship of any permanently organized institution, agency, or professional organization or association recognized by the Agency.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 2-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-910-0020

Electrology License

(1) An electrologist, licensed under ORS 690.365, may perform electrology services.

(2) An electrologist license is good for one year and becomes inactive on the last day of the month one year from the date of issuance.

(3) An electrology license holder must adhere to standards within OAR 331-910-0065, 331-910-0070, 331-910-0075, 331-910-0080, 331-910-0085 and all applicable rules listed in OAR 331 division 925.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 2-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-910-0025

Application Requirements for Electrology License

(1) An individual applying for licensure to practice electrology must:

(a) Meet the requirements of OAR 331 division 30;

(b) Submit a completed application form prescribed by the agency, which must contain the information listed in OAR 331-030-0000 and be accompanied by payment of the required application fees;

(c) Submit documentation showing proof of being 18 years of age documentation may include identification listed under OAR 331-030-0000.

(d) Submit proof of having a high school diploma or equivalent.

(e) Provide documentation of completing a qualifying pathway.

(2) License Pathway 1 — Graduate from a Licensed Electrology School:

(a) Submit official transcript from a licensed electrology school showing proof of completion of required electrology curriculum as determined by the agency under OAR 331-910-0005;

(b) Pay examination fees;

(c) Submit passing score of an Agency approved written examination in accordance with OAR 331-910-0030(1)(a) within two years from the date of application;

(d) Submit passing score of an Agency approved practical examination in accordance with OAR 331-910-0030(1)(b) within two years from the date of application; and

(e) Upon passage of all required examinations and before issuance of license, applicant must pay all license fees.

(f) An applicant is not required to provide proof of official transcripts in a field of practice if the applicant was previously licensed as an electrologist in Oregon.

(4) License Pathway 2 — Reciprocity

(a) Submit an affidavit of licensure pursuant to OAR 331-030-0040 demonstrating proof of current electrology license, which is active with no current or pending disciplinary action, as an electrologist. The licensing must be substantially equivalent to Oregon licensing requirements pursuant to ORS 690.365 or if not substantially equivalent the applicant must demonstrate to the satisfaction of the Agency that the applicant has been employed or working as an electrologist full time for three of the last five years.

(b) Pay examination fees;

(c) Submit passing score of an Agency approved written examination in accordance with OAR 331-910-0030(1)(a) within two years from the date of application;

(d) Submit passing score of an Agency approved practical examination in accordance with OAR 331-910-0030(1)(b) within two years from the date of application; and

(e) Upon passage of all required examinations and before issuance of license, applicant must pay all license fees.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 2-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-910-0030

Approved Examination for Electrology

The Agency has selected the following examinations for electrology:

(1) Written examination for electrology; and

(2) Oregon electrology practical examination.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12

331-910-0035

General Examination Information

(1) To be eligible for examination, an applicant must meet identification requirements listed under OAR 331-030-0000.

(2) The examination is administered in English only, unless an Agency approved testing contractor or vendor provides the examination in languages other than English.

(3) Examination candidates may be electronically monitored during the course of testing.

(4) Examination candidates must adhere to the maximum time allowance for each section of the examination, as established by the Agency.

(5) Notes, note taking, textbooks, notebooks, electronic equipment and communication devices, such as personal computers, pagers and cellular telephones or any other devices deemed inappropriate by the agency, are prohibited in the examination area.

(6) Taking notes, textbooks or notebooks into the written examination area is prohibited.

(7) Electronic equipment and communication devices, such as personal computers, pagers and cellular telephones or any other devices deemed inappropriate by the agency, are prohibited in the written examination area.

(8) Candidate conduct that interferes with the examination may result in the candidate's disqualification during or after the examination, the candidate's examination being deemed invalid, and forfeiture of the candidate's examination fees. Such conduct includes but is not limited to:

(a) Directly or indirectly giving, receiving, soliciting, and attempting to give, receive or solicit aid during the examination process;

(b) Violations of subsections (6), (7), or (8) of this rule;

(c) Removing or attempting to remove any examination-related information, notes or materials from the examination site;

(d) Failing to follow directions relative to the conduct of the examination; and

(e) Exhibiting behavior that impedes the normal progress of the examination.

(9) If the candidate is disqualified from taking the examination or the candidate's examination is deemed invalid for reasons under subsection (8) of this rule, the candidate may be required to reapply, submit additional examination fees, and request in writing to schedule a new examination date, before being considered for another examination opportunity.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12

331-910-0040

Written Examination Retake Requirements

(1) Failed sections of a written or examination may be retaken as follows:

(a) After first failed attempt — applicant may not retake for seven calendar days;

(b) After second failed attempt — applicant may not retake for seven calendar days;

(c) After third failed attempt — applicant may not retake for 30 calendar days, must pay all additional fees and must submit an official transcript certifying completion of an additional 100 hours of instruction in theory, focused on the approved curriculum outlined in OAR 331-910-0005 from a career school licensed under ORS 345 on a form prescribed by the Agency;

(d) After fourth failed attempt — applicant may not retake for seven calendar days;

(e) After fifth failed attempt — applicant may not retake for seven calendar days;

(f) After sixth failed attempt — applicant may not retake for 30 calendar days, must pay all additional fees and must submit an official transcript certifying completion of an additional 100 hours of instruction in theory, focused on the approved curriculum outlined in OAR 331-910-0005 from a career school licensed under ORS 345 on a form prescribed by the agency;

(g) After seventh failed attempt — ability to retake, requirements for retake, or both will be determined by the Agency on a case-by-case basis.

(2) Applicants retaking the examination must meet the requirements under OAR 331-030-0000.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 2-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-910-0045

Practical Examination Retake Requirements

(1) Failed practical examinations may be retaken at a date and time determined by the Agency. Applicants retaking a failed practical must notify the Agency within 30 days before the next scheduled examination date and pay all examination fees.

(2) Applicants who fail to pass the practical examination for electrology after three attempts (initial examination plus two retakes):

(a) Must wait 30 calendar days to retake the practical examination;

(b) Must pay all additional fees;

(c) Must submit an official transcript certifying completion of an additional 100 hours of instruction in theory, focused on the approved curriculum outlined in OAR 331-910-0005 from a career school licensed under ORS 345 on a form prescribed by the agency;

(3) After third failed attempt — ability to retake, requirements for retake, or both will be determined by the Agency on a case-by-case basis.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 2-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-910-0050

Renewal of Electrology License

(1) A licensee is subject to the provisions of OAR chapter 331, division 30 regarding the renewal of a license and provisions regarding authorization to practice, identification, and requirements for issuance of a duplicate license.

(2) Electrology renewal under this rule is valid for one year.

(3) LICENSE RENEWAL: To avoid delinquency penalties, an electrology license renewal must be made prior to the license entering inactive status. The licensee must submit the following:

(a) Renewal application form;

(b) Payment of required renewal fee pursuant to 331-940-0000;

(c) Attestation of having obtained required annual continuing education under OAR 331-910-0055, on a form prescribed by the agency. Continuing education is required whether the license is current or inactive;

(4) INACTIVE LICENSE RENEWAL: An electrology license may be inactive for up to three years. A licensee who is inactive is not authorized to practice. When renewing after entering inactive status, the licensee holder must submit the following:

(a) Renewal application form;

(b) Payment of delinquency and license fees pursuant to OAR 331-940-0000;

(c) Attestation of having obtained required annual continuing education under OAR 331-910-0055, on a form prescribed by the agency. Continuing education is required whether the license is current or inactive;

(5) EXPIRED LICENSE: An electrology license that has been inactive for more than three years is expired and the license holder must reapply and meet the requirements listed in OAR 331-910-0025.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12

331-910-0055

Continuing Education for Electrology License

A licensed electrologist must comply with the following continuing education requirements:

(1) Complete 8 clock hours of satisfactory continuing education courses either as one unit or combination of units, every year.

(2) Satisfactory continuing education courses must fit into the approved course of study outlined in OAR 331-910-0005, and must be obtained as follows:

(a) 4 hours must involve participation or attendance at an instructional program presented, recognized, or under the auspices of any permanently organized institution, agency, or completion and certification by an approved national home study organization; and

(b) 4 hours may be self-study which may include the following:

(A) Correspondence courses including online courses;

(B) Review of publications, textbooks, printed material, or audio cassette(s);

(C) Viewing of films, videos, or slides;

(3) A licensee must report compliance with the continuing education requirement through attestation on the license renewal document. Licensees will be subject to the provisions of OAR 331-910-0060 pertaining to periodic audit of continuing education.

(4) A licensee may carry up to 8 continuing education hours forward to the next renewal cycle.

(5) Continuing education is required for renewal, every year, even if the license has been inactive or suspended.

(6) A licensee must maintain proof of continuing education for five years following the date of the continuing education hours obtained, for auditing purposes.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 2-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-910-0060

Continuing Education: Audit, Required Documentation and Sanctions

(1) The Oregon Health Licensing Agency will audit a select percentage of licenses determined by the Council to verify compliance with continuing education requirements.

(2) Licensees notified of selection for audit of continuing education attestation must submit to the Agency, within 30 calendar days from the date of notification, satisfactory evidence of participation in required continuing education in accordance with OAR 331-910-0055.

(3) Documentation of attendance at a program or course provided by the sponsor must include:

(a) Name of sponsoring institution/association or organization;

(b) Title of presentation and description of content;

(c) Name of instructor or presenter;

(d) Date of attendance and duration in hours;

(e) Course agenda;

(f) Official transcript, diploma, certificate, statement or affidavit from the sponsor, attesting to attendance.

(4) Documentation substantiating completion of continuing education through self-study, must show a direct relation to the subjects outlined in OAR 331-910-0005, be submitted on forms provided by the agency and include the following:

(a) Name of sponsor or source, type of study, description of content, date of completion and duration in clock hours;

(b) Name of approved correspondence courses or national home study issues;

(c) Name of publications, textbooks, printed material or audio-recorded material, including date of publication, publisher, and ISBN issued.

(d) Name of films, videos, or slides, including date of production, name of sponsor or producer and catalog number.

(5) If documentation of continuing education is invalid or incomplete, the licensee must correct the deficiency within 30 calendar days from the date of notice. Failure to correct the deficiency within the prescribed time must constitute grounds for disciplinary action.

(6) Misrepresentation of continuing education or failing to meet continuing education requirements or documentation may result in disciplinary action, which may include, but is not limited to, assessment of a civil penalty and suspension or revocation of the license.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12

331-910-0065

Electrology Practice Standards and Prohibitions

(1) Electrologists are prohibited from performing services on treatment areas with high propensity towards bacterial colonization, such as nostrils and ear canals.

(2) Electrologists must first obtain written authorization from a physician licensed under ORS 677 when any of the following exists:

(a) Request for hair removal from moles;

(b) Removal of eyelashes; or

(c) The client has a pacemaker, implantable neuromodulators or other implantable electronic devices;

(4) An electrologist may use towels and linens when providing electrology services. When using towels and linens the following standards must be met:

(a) Clean linens must be used for each client;

(b) Use of a common towel is prohibited;

(c) Clean towels and linens must be enclosed in a clean storage area or in a closed container until needed;

(d) Used linens must be disposed of or stored in a closed or covered container until laundered; and

(e) Used linens must be laundered either by a regular commercial laundering or by a noncommercial laundering process which includes use of commercial laundry detergent manufactured for the specific purpose of cleaning clothes, linens or other washable fabric, and immersion in hot water during the wash cycle.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 2-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-910-0070

Standards for Client Services for Electrology

(1) An electrologist must observe and adhere to the following hand washing and disposable glove standards when servicing clients:

(a) **HAND WASHING:** Hands must be washed or treated with an antibacterial hand sanitizer before and after treatment of each client, and before putting on disposable gloves and immediately after disposable gloves are removed;

(b) Hand washing must include thoroughly washing the hands in warm, running water with liquid soap using friction on all surfaces of the hands and wrists, then rinsing hands and drying hands with a clean, disposable paper towel, or by using an antibacterial hand sanitizer by using friction on all surfaces of the hands and wrists. Use of bar soap is prohibited.

(2) An electrologist must observe and adhere to the following protective disposable glove standards when servicing clients:

(a) **PROTECTIVE DISPOSABLE GLOVES:** A new pair of disposable gloves must be worn during the treatment of each client;

(b) Hands must be washed in accordance with hand washing instructions listed in Subsection (1) of this rule before putting on disposable gloves and immediately after disposable gloves are removed;

(c) When a treatment session is interrupted disposable gloves must be removed and discarded. A new pair of disposable gloves must be put on when returning to the electrology service area.

(d) When a licensee leaves the electrology procedure area in the middle of an electrology procedure, gloves must be removed before leaving the procedure area, hand washing instructions listed in Sub-

section (1) of this rule must be followed and a new pair of gloves put on when returning to the procedure area.

(e) Disposable gloves must be removed before leaving the area where electrology services are performed.

(f) Torn or perforated gloves must be removed immediately, and hand washing instructions listed in Subsection (1) of this rule must be followed and gloves changed following hand washing.

(g) The use of disposable gloves does not preclude or substitute for hand washing instructions listed in subsection (1) of this rule.

(3) Disposable gloves must be worn during pre-cleaning, cleaning, rinsing, sterilizing and drying of equipment and instruments and disinfecting of surfaces;

(4) A client's skin must be thoroughly cleaned with an astringent. If flammable the astringent should be allowed to dry.

Stat. Auth: ORS 676.607 & 676.615

Stats. Implemented: ORS 676.606, 676.607, 690.350, 690.365, 690.390 & 690.405

Hist.: HLA 2-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12; HLA 15-2012(Temp), f. & cert. ef. 10-15-12 thru 4-12-13

331-910-0075

Sterilization Standards for Electrology

(1) Needles (filaments) must be single use, used on one client, then properly disposed of in an approved sharps container defined under OAR 331-910-0000.

(2) All non-sterilized instruments or reusable instruments that come in direct contact with a client's skin or are exposed to blood or bodily fluid must be cleaned, disinfected and sterilized before use on a client or re-use on another client.

(3) New gloves must be worn during any sterilization procedure.

(4) The cleaning, disinfection and sterilization process listed in Subsection (5) of this rule is not required if single-use prepackaged sterilized instruments, obtained from suppliers or manufacturers are used.

(5) Approved cleaning, disinfection and sterilization process for non-sterilized instruments or reusable instruments includes the following ordered method after each use:

(a) Clean non-sterilized instruments or reusable instruments by manually brushing or swabbing visible foreign matter and rinsing the instruments with warm water and an appropriate detergent solution to remove blood and bodily fluids;

(b) Disinfect non-sterilized instruments or reusable instruments by immersing instruments in a high level disinfectant. Instruments must be fully submerged to ensure contact with all surfaces for an amount of time specified in the manufacturer's instructions. If the electrologist is using an autoclave listed in subsection (e) of this rule the electrologist is not required to immerse instruments in a high level disinfectant.

(c) Clean and disinfected non-sterilized instruments or reusable instruments must be rinsed and placed in an ultrasonic unit that operates at 40 to 60 hertz which is filled with an appropriate ultrasonic solution including but not limited to an enzymatic cleaner, or rinsed, patted dry and submerged and soaked in a protein dissolving detergent or enzyme cleaner, followed by a thorough rinse. The ultrasonic cleaner must remain covered when in use;

(d) Remove non-sterilized instruments or reusable instruments from the ultrasonic unit or protein dissolving detergent or enzyme cleaner. All instruments must be rinsed, air dried, and individually packaged in sterilization pouches that include use of a chemical indicator strip to assure sufficient temperature during each sterilization cycle. The date the sterilization was performed must be applied to the sterilization pouch;

(e) Individually packaged non-sterilized instruments or reusable instruments must be sterilized by using autoclave sterilizer (steam or chemical), or dry heat sterilizer registered and listed with the FDA;

(f) After sterilization, the sterilized instruments must be stored in a dry, disinfected, closed cabinet or other tightly-covered container reserved for the storage of such instruments.

(6) Use of a biological monitoring system ("spore tests") must be done at least once a month, verified through an independent laboratory, to assure all microorganisms have been destroyed and sterilization achieved.

(7) All sterilization pouches listed in Subsection (5)(d) of this rule must contain a color indicator strip which measures temperature control and general functioning of the equipment.

(8) The ultrasonic unit listed in subsection (5)(c) of this rule must be used, cleaned, and maintained in accordance with manufacturer's instructions and a copy of the manufacturer's recommended procedures for the operation of the ultrasonic unit must be kept on file at the body art facility.

(9) The autoclave sterilizer (steam or chemical), or dry heat sterilizer listed in Subsection (5)(e) of this rule must be used, cleaned, and maintained in accordance with manufacturer's instructions and a copy of the manufacturer's recommended procedures for the operation of the autoclave sterilizer (steam or chemical), or dry heat sterilizer must be kept on file at the facility.

(10) Biological spore test results listed in subsection (6) of this rule must be immediately available at all times for inspection by the Agency and kept at facility premises for a minimum of two years. Biological spore test results must be on laboratory letterhead and must contain the test date, and the name, model and serial number (if applicable) of the sterilizer tested.

(11) The expiration date for sterilized instruments is one year from the date of sterilization unless the integrity of the package is compromised.

(12) Sterilized instruments may not be used if the package integrity has been breached is wet or stained, or the expiration date has exceeded without first meeting the requirements listed in Subsection (5) of this rule.

(13) All sterilized instruments used during electrology services must remain stored in sterile packages and in a dry, disinfected, closed cabinet or other tightly covered container reserved for the storage of such instruments until just prior to the performance of an electrology procedure.

(14) If a biological spore test listed in subsection (6) of this rule, result is positive, a licensee must discontinue the use of that autoclave sterilizer (steam or chemical), or dry heat sterilizer until it has been serviced and a negative spore test has been recorded before putting that sterilizer back into service. Until a negative spore test has been received, the licensee must:

(a) Use an alternative autoclave sterilizer (steam or chemical), or dry heat sterilizer;

(b) Use only sterilized instruments that have a sterilization date before the date the last negative spore test was recorded; or

(c) Use only single use instruments.

(15) Following a negative biological spore test reusable instruments which were sterilized following the receipt of the negative spore test must be repackaged and sterilized pursuant to Subsection (5) of this rule, before use.

(17) Following a negative spore test the licensee or facility must contact all clients in writing who may have received services prior to receiving the negative spore test results.

Stat. Auth: ORS 676.607 & 676.615

Stats. Implemented: ORS 676.606, 676.607, 690.350, 690.365, 690.390 & 690.405

Hist.: HLA 2-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-910-0080

General Standards

(1) The cleanliness of any common in a facility is the responsibility of each license holder. All license holders may be cited for violations found in the common area.

(2) An electrologist licensed to perform services or a licensed facility owner must:

(a) Use and maintain appropriate equipment and instruments for providing services in a field of practice at the place of business;

(b) Use equipment and instruments in a manner described in the manufacturer's instructions which is consistent with the manufacturer's intended use of the device by the FDA;

(c) Use equipment and instruments that are not prohibited for use in a field of practice by the Agency or the FDA;

(d) Ensure a high-level disinfectant is used in accordance with manufacturer's instructions to disinfect surfaces where services are performed.

(e) Ensure chemicals are stored in labeled, closed containers.

(f) Ensure that single-use disposable paper products, single-use needles (filaments) and protective gloves are used for each client.

(g) Ensure lavatories located within the facility are kept clean and in good working order at all times. Air blowers within lavatories can be substituted for disposable hand towels.

(h) Ensure all waste material related to a service in a field of practice be deposited in a covered container following service for each client.

(i) Ensure pets or other animals not be permitted in the business facility. This prohibition does not apply to service animals recognized by the American with Disabilities Act or to fish in aquariums or non-poisonous reptiles in terrariums.

(j) Ensure all disinfecting solutions or agents be kept at adequate strengths to maintain effectiveness, be free of foreign material and be available for immediate use at all times the facility is open for business.

(k) Ensure waste disposed of in receptacles located in non-service areas is limited to materials, which are not practice-related or used in the performance of any client services.

(l) Ensure all waste items that come in direct contact with the client's skin that cannot be cleaned and disinfected must be disposed of utilizing a "double bagging" technique: which means the waste must be completely enclosed inside a discarded glove or disposed of in a closed plastic bag that is separate from the garbage liners. The waste must be disposed of in a covered waste receptacle immediately after use.

(m) Ensure disposable sharp objects that come in contact with blood and/or body fluids must be disposed of in a sharps container.

(n) Adhere to all Centers for Disease Control and Prevention, Standard Precautions.

(o) Have unrestricted access or availability to a sink with hot and cold running water, as part of surrounding premises or adjacent to the facility. If sink is located within a restroom the licensee must ensure that the sink is disinfected with a high level disinfectant upon completion of an electrology procedure or following the sterilization of equipment.

(p) Ensure that all instruments that come in direct contact with client's skin are handled using gloves.

(3) An electrologist licensee must wear eye goggles, shields or a mask if spattering is possible while providing services.

(4) Cross contaminating from touch or air particulates in any procedure area which comes in direct contact with client is prohibited.

Stat. Auth: ORS 676.607 & 676.615

Stats. Implemented: ORS 676.606, 676.607, 690.350, 690.365, 690.390 & 690.405

Hist.: HLA 2-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-910-0085

Client Records

(1) A licensee is responsible for maintaining and keeping copies of all client records. If client records are maintained by the facility the facility owner must provide the licensee with copies of those client records upon request. The record must include the following for each client:

(a) Name, address, telephone number and date of birth of client;

(b) Date of each service, procedure location on the body and type of service performed on client;

(c) Name and license number of the licensee providing service. If more than one licensee is providing services on one client the licensee must initial the date of each service performed;

(d) Special instructions or notations relating to the client's medical or skin conditions including but not limited to diabetes, cold sores and fever blisters, psoriasis or eczema, pregnancy or breast-feeding/nursing.

(e) Complete list of the client's sensitivities to medicines or topical solutions;

(f) History of the client's bleeding disorders;

(g) Description of complications during procedure(s);

(h) Signature from the client that they have received the following information in writing and verbally:

(A) All information related to the electrology service including possible reactions, side effects and potential complications of the service and consent to obtaining the electrology service; and

(B) After care instructions including care following service, possible side effects and complications and restrictions.

(2) A licensee may obtain advice from physicians regarding medical information needed to safeguard client and licensee. Advice from the physician must be documented in the client record.

(3) For the purpose of (1) and (2) of this rule records must be maintained at facility premises for a minimum of three years and must be made immediately available to the agency upon request.

(4) Client records must be typed or printed in a legible format. Client records, which are not readable by the Agency, will be treated as incomplete.

Stat. Auth: ORS 676.607 & 676.615

Stats. Implemented: ORS 676.606, 676.607, 690.350, 690.365, 690.390 & 690.405
Hist.: HLA 2-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

DIVISION 915

TATTOO

331-915-0000

Tattoo Definitions

The following definitions apply to OAR chapter 331, division 915:

(1) "Affidavit of Licensure" has the meaning set forth in OAR 331-030-0040.

(2) "Agency" means the Oregon Health Licensing Agency.

(3) "Direct supervision" means the supervisor or instructor is present in the facility and actively involved in direct oversight and training of students.

(4) "EPA" means United States Environmental Protection Agency.

(5) "FDA" means Food and Drug Administration.

(6) "Field of practice" has the definition set forth in ORS 690.350.

(7) "High-level disinfectant" means a chemical agent, registered with the EPA, which has demonstrated tuberculocidal activity.

(8) "Instruments" means equipment used during tattooing services. Types of instruments include but are not limited to needles and tubes.

(9) "Sharps container" means a puncture-resistant, leak-proof container that can be closed for handling, storage, transportation, and disposal. The container must be labeled with the "Biohazard" symbol.

(10) "Official transcript" means:

(a) An original document authorized by the appropriate office in the Oregon Department of Education and certified by a career school licensed under ORS 345 indicating applicant identity information, field of practice(s) enrolled under, specific hour requirements for each field of practice if applicable, enrollment information and a signature by an authorized representative on file with the Agency. Original documents must be submitted directly to the Agency from the educational institution by United States Postal Service mail or other recognized mail service providers in a sealed envelope; or

(b) A document authorized by the appropriate office in the Oregon Department of Education and certified by career school licensed under ORS 345 indicating applicant identity information, field of practice(s) enrolled under, specific hour requirements for each field of practice if applicable, enrollment information and a signature by an authorized representative on file with the Agency. Non-original documents shall only be accepted when, and in the manner, approved by the Agency.

(11) "Practitioner" means a person licensed to perform services included within a field of practice.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-915-0005

Approved Course of Study for Tattooing

(1) To be approved by the Oregon Health Licensing Agency, a course of study must include at least 360 hours of instruction. The course must include at least 210 hours of theory and at least 150 hours of practical work.

(2) For the purposes of determining qualification for licensure, practical work must include a minimum of 50 completed procedures. "Completed procedure" means a tattoo which has been finished on a

live human being, including any touchups or additional work following initial healing, and the client is released from service.

(3) All practical applications performed during training in the subject areas listed in subsection (4) of this rule are counted toward meeting the minimum 150 hours of practical tattooing experience.

(4) A course of study must include, but is not limited to, the following areas:

(a) Needles and needle bars — metal or plastic device used to attach the needle to a tattoo machine: 20 hours of theory;

(b) Tattoo machines and equivalent equipment: 20 hours of theory;

(c) Equipment/Supplies: 20 hours of theory;

(d) Safety, Infection Control and Sterilization: 40 hours of theory;

(e) Basic color theory and pigments: 10 hours of theory;

(f) Design, art and placement: 10 hours of theory;

(g) Skin: 20 hours of theory;

(h) Client services 20 hours of theory;

(i) Business operations, including exposure control plan and federal regulations: 40 hours of theory;

(j) Oregon Laws and Rules: 10 hours of theory training.

(5) As part of the approved course of study, all hours of theory must be completed prior to practical work being performed on the general public.

(6) Training must be conducted by an Oregon licensed tattoo artist registered as a teacher by the Department of Education, Private Career Schools.

(7) A registered teacher must provide direct supervision of practical training on a one-to-one student/teacher ratio for students performing practical training while the student is working on the general public.

(8) For the purpose of this rule direct supervision means the teacher is present and actively involved in direct oversight and training of students.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12

331-915-0010

Tattoo License

(1) A tattoo artist licensed under ORS 690.365 may perform tattooing services.

(2) A tattoo license is good for one year and becomes inactive on the last day of the month one year from the date of issuance.

(3) A tattoo license holder must adhere to all standards under OAR 331-915-0065, 331-915-0070, 331-915-0075, 331-915-0080, 331-915-0085 and all applicable rules listed in OAR 331 division 925.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-915-0015

Application Requirements for Tattoo License

(1) An individual applying for licensure to practice tattooing must:

(a) Meet the requirements of OAR 331 division 30;

(b) Submit a completed application form prescribed by the agency, which must contain the information listed in OAR 331-030-0000 and be accompanied by payment of the required application fees;

(c) Submit documentation having completed blood borne pathogens training from an agency approved provider;

(d) Submit documentation having completed cardiopulmonary resuscitation and basic first aid training from an agency approved provider;

(e) Submit documentation showing proof of being 18 years of age documentation may include identification listed under OAR 331-030-0000;

(f) Submit proof of having a high school diploma or equivalent; and

(g) Provide documentation of completing a qualifying pathway.

(2) License Pathway 1 — Graduate from an Oregon Licensed Career School for Tattooing:

(a) Submit official transcript from a tattooing career school under ORS 345, and approved by the Agency showing proof of completion of required tattooing curriculum as determined by the agency under OAR 331-915-0005;

(b) Pay examination fees;

(c) Submit passing score of an Agency approved written examination in accordance with OAR 331-915-0030(1)(a) within two years from the date of application;

(d) Submit passing score of an Agency approved practical skills assessment examination in accordance with OAR 331-915-0030(1)(b) within two years from the date of application; and

(e) Upon passage of all required examinations and before issuance of registration license, applicant must pay all license fees.

(f) An applicant is not required to provide proof of official transcripts in a field of practice if the applicant was previously licensed as a tattoo artist in Oregon.

(3) License Pathway 2 — Reciprocity:

(a) Submit an affidavit of licensure pursuant to OAR 331-030-0040 demonstrating proof of current license as a tattoo artist, which is active with no current or pending disciplinary action. The licensing must be substantially equivalent to Oregon licensing requirements pursuant to ORS 690.365 or if not substantially equivalent the applicant must demonstrate to the satisfaction of the Agency that the applicant has been employed or working as a tattoo artist full time for three of the last five years.

(b) Pay examination fees;

(c) Submit passing score of an Agency approved written examination in accordance with OAR 331-915-0030(1)(a) within two years from the date of application;

(d) Submit passing score of an Agency approved practical skills assessment examination in accordance with OAR 331-915-0030(1)(b) within two years from the date of application; and

(e) Upon passage of all required examinations and before issuance of a license, applicant must pay all license fees.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-915-0020 Temporary Tattoo License

(1) A temporary tattoo license pursuant to ORS 690.365 is a temporary license to perform tattooing services on a limited basis, not to exceed 15 consecutive calendar days. A temporary tattoo license holder;

(a) May revive the license up to four times in a 12 month period from the date the Agency receives the initial application. Reviving a license can be done consecutively with no lapse in active license dates;

(b) Must submit all requests to revive a license on a form prescribed by the Agency. Request to revive a license must be received at least 15 days before tattooing services are provided unless otherwise approved by the Agency.

(c) Must submit notification of a change in work location at least 24 hours before services are performed on a form prescribed by the Agency;

(d) Must work in a licensed facility.

(2) A temporary tattoo license holder must adhere to all standards under OAR 331-915-0065, 331-915-0070, 331-915-0075, 331-915-0080, 331-915-0085 and all applicable rules listed in OAR 331 division 925.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12; HLA 15-2012(Temp), f. & cert. ef. 10-15-12 thru 4-12-13

331-915-0025

Application Requirements for Temporary Tattoo License

An individual applying for a Temporary Tattoo License must:

(1) Meet the requirements of OAR 331 division 30;

(2) Submit a completed application form prescribed by the Agency, which must contain the information listed in OAR 331-030-0000 and be accompanied by payment of the required application fees and must be received at least 15 days before tattooing services are provided to clients;

(3) Submit proof of being 18 years of age. Documentation may include identification listed under OAR 331-030-0000;

(4) Submit proof of current training in blood-borne pathogens; and

(5) Attest to six months of training or experience, within the last two years, performing tattooing on a form prescribed by the Agency; or

(6) Submit affidavit of licensure pursuant to OAR 331-030-0040.

(7) For the purpose of this rule training or experience includes attendance or participation at an instructional program presented, recognized, or under the sponsorship of any permanently organized institution, agency, or professional organization or association recognized by the Agency.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 7-2012(Temp), f. & cert. ef. 4-20-12 thru 10-16-12; HLA 8-2012(Temp), f. & cert. ef. 5-3-12 thru 10-16-12; HLA 10-2012, f. & cert. ef. 6-25-12; HLA 15-2012(Temp), f. & cert. ef. 10-15-12 thru 4-12-13

331-915-0030

Approved Examination for Tattoo

The Agency has approved the following examinations for tattooing:

(1) Oregon written examination; and

(2) Oregon practical skills assessment examination.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12

331-915-0035

General Tattooing Examination Information

(1) To be eligible for examination, an applicant must meet identification requirements listed under OAR 331-030-0000.

(2) The examination is administered in English only, unless an agency approved testing contractor or vendor provides the examination in languages other than English.

(3) Examination candidates may be electronically monitored during the course of testing.

(4) Examination candidates must adhere to the maximum time allowance for each section of the examination, as established by the Agency.

(5) Notes, note taking, textbooks, notebooks, electronic equipment and communication devices, such as personal computers, pagers and cellular telephones or any other devices deemed inappropriate by the agency, are prohibited in the examination area.

(6) Taking notes, textbooks or notebooks into the written examination area is prohibited.

(7) Electronic equipment and communication devices, such as personal computers, pagers and cellular telephones or any other devices deemed inappropriate by the agency, are prohibited in the written examination area.

(8) Candidate conduct that interferes with the examination may result in the candidate's disqualification during or after the examination, the candidate's examination being deemed invalid, and forfeiture of the candidate's examination fees. Such conduct includes but is not limited to:

(a) Directly or indirectly giving, receiving, soliciting, and attempting to give, receive or solicit aid during the examination process;

(b) Violations of subsections (6), (7), or (8) of this rule;

(c) Removing or attempting to remove any examination-related information, notes or materials from the examination site;

(d) Failing to follow directions relative to the conduct of the examination; and

(e) Exhibiting behavior that impedes the normal progress of the examination.

(9) If the candidate is disqualified from taking the examination or the candidate's examination is deemed invalid for reasons under subsection (8) of this rule, the candidate may be required to reapply, submit additional examination fees, and request in writing to schedule a new examination date, before being considered for another examination opportunity.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12

331-915-0040

Written Examination Retake Requirements

(1) Failed sections of the written examination may be retaken as follows:

(a) After first failed attempt — applicant may not retake for seven calendar days;

(b) After second failed attempt — applicant may not retake for seven calendar days;

(c) After third failed attempt — applicant may not retake for 30 calendar days, must pay all additional fees and must submit an official transcript certifying completion of an additional 100 hours of instruction in theory, focused on the approved curriculum outlined in OAR 331-915-0005 from a career school licensed under ORS 345 on a form prescribed by the agency;

(d) After fourth failed attempt — applicant may not retake for seven calendar days;

(e) After fifth failed attempt — applicant may not retake for seven calendar days;

(f) After sixth failed attempt — applicant may not retake for 30 calendar days, must pay all additional fees and must submit an official transcript certifying completion of an additional 100 hours of instruction in theory, focused on the approved curriculum outlined in OAR 331-915-0005 from a career school licensed under ORS 345 on a form prescribed by the Agency;

(g) After seventh failed attempt — ability to retake, requirements for retake, or both will be determined by the Agency on a case-by-case basis.

(2) Applicants retaking the examination must meet the requirements under OAR 331-030-0000.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-915-0045

Practical Examination Retake Requirements

(1) Failed practical examinations may be retaken at a date and time determined by the Agency. Applicants retaking a failed practical must notify the Agency within 30 days before the next scheduled examination date and pay all examination fees

(2) Applicants who fail to pass the practical examination for tattooing after three attempts (initial examination plus two retakes):

(a) Must wait 30 calendar days to retake the practical examination;

(b) Must pay all additional fees;

(c) Must submit an official transcript certifying completion of an additional 100 hours of instruction in theory, focused on the approved curriculum outlined in OAR 331-910-0005 from a career school licensed under ORS 345 on a form prescribed by the agency;

(3) After fourth failed attempt — ability to retake, requirements for retake, or both will be determined by the Agency on a case-by-case basis.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-915-0050

Renewal of a Tattoo License

(1) A licensee is subject to the provisions of OAR chapter 331, division 30 regarding the renewal of a license and provisions regarding authorization to practice, identification, and requirements for issuance of a duplicate license.

(2) Tattoo license renewal under this rule is valid for one year.

(3) LICENSE RENEWAL: To avoid delinquency penalties, a tattoo license renewal must be made prior to the license entering inactive status. The licensee must submit the following:

(a) Renewal application form;

(b) Payment of required renewal fee pursuant to 331-940-0000;

(c) Attestation of having obtained required annual continuing education under OAR 331-915-0055, on a form prescribed by the agency. Continuing education is required whether the license is current or inactive;

(d) Attestation of current certification in cardiopulmonary resuscitation from an Agency approved provider;

(e) Attestation of current first aid training an Agency approved provider; and

(f) Attestation of current certification in blood borne pathogens training from an Agency approved provider.

(4) INACTIVE LICENSE RENEWAL: A tattoo license may be inactive for up to three years. A licensee who is inactive is not authorized to practice. When renewing after entering inactive status, the licensee holder must submit the following:

(a) Renewal application form;

(b) Payment of delinquency and license fees pursuant to OAR 331-940-0000;

(c) Attestation of having obtained required annual continuing education under OAR 331-915-0055, on a form prescribed by the agency. Continuing education is required whether the license is current or inactive;

(d) Attestation of current certification in cardiopulmonary resuscitation from an Agency approved provider;

(e) Attestation of current first aid training an Agency approved provider; and

(f) Attestation of current certification in blood borne pathogens training from an Agency approved provider.

(5) EXPIRED LICENSE: A tattoo license that has been inactive for more than three years is expired and the license holder must reapply and meet the requirements listed in OAR 331-915-0015.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12

331-915-0055

Continuing Education for Tattoo License

A licensed tattoo holder must comply with the following continuing education requirements:

(1) Complete 10 clock hours of satisfactory continuing education, either as one unit or combination of units, every year.

(2) Satisfactory continuing education courses must fit into the approved course of study outlined in OAR 331-915-0005, and must be obtained as follows:

(a) Five hours must involve participation or attendance at an instructional program presented, recognized, or under the auspices of any permanently organized institution, agency, or completion and certification by an approved national home study organization; and

(b) Five hours may be self-study which may include the following:

(A) Correspondence courses including online courses;

(B) Review of publications, textbooks, printed material, or audio cassette(s);

(C) Viewing of films, videos, or slides;

(3) A licensee must report compliance with the continuing education requirement through attestation on the license renewal document. Licensees will be subject to the provisions of OAR 331-915-0060 pertaining to periodic audit of continuing education.

(4) Hours of continuing education, in excess of the requirement for renewal will not be carried forward.

(5) Continuing education requirements must be met every year, even if the license is inactive or suspended.

(6) A licensee must maintain proof of continuing education for five years following the date of the continuing education hours obtained, for auditing purposes.

(7) Licensees failing to obtain 5 clock hours of continuing education annually must reapply and qualify according to the requirements of OAR 331-915-0015.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12

331-915-0060

Continuing Education: Audit, Required Documentation and Sanctions

(1) The Agency will audit a select percentage of licenses determined by the Council to verify compliance with continuing education requirements.

(2) Licensees notified of selection for audit of continuing education attestation must submit to the agency, within 30 calendar days from the date of notification, satisfactory evidence of participation in required continuing education in accordance with OAR 331-915-0055.

(3) Documentation of attendance at a program or course provided by the sponsor must include:

- (a) Name of sponsoring institution/association or organization;
- (b) Title of presentation and description of content;
- (c) Name of instructor or presenter;
- (d) Date of attendance and duration in hours;
- (e) Course agenda;
- (f) Official transcript, diploma, certificate, statement or affidavit from the sponsor, attesting to attendance.

(4) Documentation substantiating the completion of continuing education through self-study must show a direct relation to subjects outlined in OAR 331-915-0005, be submitted on forms provided by the agency and include the following:

- (a) Name of sponsor or source, type of study, description of content, date of completion and duration in clock hours;
- (b) Name of approved correspondence courses or national home study issues;
- (c) Name of publications, textbooks, printed material or audio-cassette's, including date of publication, publisher, and ISBN issued.
- (d) Name of films, videos, or slides, including date of production, name of sponsor or producer and catalog number.

(5) If documentation of continuing education is invalid or incomplete, the licensee must correct the deficiency within 30 calendar days from the date of notice. Failure to correct the deficiency within the prescribed time constitutes grounds for disciplinary action.

(6) Misrepresentation of continuing education or failing to meet continuing education requirements or documentation may result in disciplinary action, which may include, but is not limited to assessment of a civil penalty and suspension or revocation of the license.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12

331-915-0065

Tattoo Practice Standards and Prohibitions

(1) Inks, dyes, or pigments must be purchased from a commercial supplier or manufacturer. Products banned or restricted by the Food and Drug Administration must not be used.

(2) Notwithstanding OAR 331-930-0025, tattoo artists must disinfect plastic or acetate stencil used to transfer the design to the client's skin, if not using disposable stencils. If the plastic or acetate stencil

is reused the licensee must thoroughly clean and rinse and immerse in a high level disinfectant according to the manufacturer's instructions.

(3) Upon completion of a tattoo service, the following procedures are required:

(a) The skin must be cleansed; excluding the area surrounding the eyes, with a clean single-use paper product saturated with an antiseptic solution;

(b) A clean covering must be placed over designs and adhered to the skin; and

(c) An absorbent material must be incorporated into the covering to prevent the spread of bodily fluids and cross contamination, unless the clean covering listed in subsection (3)(a) of this rule is an impenetrable barrier which prevents the spread of bodily fluids and cross contamination.

(4) Tattooing services may be performed on a person under 18 years of age when authorized or prescribed by a physician's statement.

(5) Tattooing is prohibited:

(a) On a person who shows signs of being inebriated or appears to be incapacitated by the use of alcohol or drugs;

(b) On a person who show signs of intravenous drug use;

(c) On a person with sunburn or other skin diseases or disorders such as open lesions, rashes, wounds, puncture marks in areas of treatment;

(d) On a person under 18 years of age, regardless of parental or legal guardian consent unless the requirements of subsection (4) of this rule are met.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-915-0070

General Standards for Tattooing

(1) The cleanliness of any common in a facility is the responsibility of each license holder. All license holders may be cited for violations found in the common area.

(2) An individual licensed to perform services in a field of practice or a licensed facility owner must:

(a) Use and maintain appropriate equipment and instruments for providing services in a field of practice at the place of business;

(b) Use equipment and instruments in a manner described in the manufacturer's instructions which is consistent with the manufacturer's intended use of the device by the FDA;

(c) Use equipment and instruments that are not prohibited for use in a field of practice by the Agency or the FDA;

(d) Ensure a high-level disinfectant is used in accordance with manufacturer's instructions to disinfect surfaces where services are performed.

(e) Ensure chemicals are stored in labeled, closed containers.

(f) Ensure that single-use disposable paper products, single-use needles, and protective gloves are used for each client. Use of towels and linens are prohibited.

(g) Have unrestricted access or availability to a sink with hot and cold running water, as part of surrounding premises or adjacent to the facility but separate from a restroom.

(h) Ensure lavatories located within the facility are kept clean and in good working order at all times. Air blowers within lavatories can be substituted for disposable hand towels.

(i) Ensure all waste material related to a service in a field of practice be deposited in a covered container following service for each client.

(j) Ensure pets or other animals not be permitted in the business facility. This prohibition does not apply to service animals recognized by the American with Disabilities Act or to fish in aquariums or non-poisonous reptiles in terrariums.

(k) Ensure all disinfecting solutions or agents be kept at adequate strengths to maintain effectiveness, be free of foreign material and be available for immediate use at all times the facility is open for business.

(l) Ensure waste disposed of in receptacles located in non-service areas is limited to materials, which are not practice-related or used in the performance of any client services.

(m) Ensure all waste items that come in direct contact with the client's skin that cannot be cleaned and sterilized must be disposed of utilizing a "double bagging" technique: which means the waste must be completely enclosed inside a discarded glove or disposed of in a closed plastic bag that is separate from the garbage liners. The waste must be disposed of in a covered waste receptacle immediately after use.

(n) Ensure disposable sharp objects that come in contact with blood and/or body fluids must be disposed of in a sharps container.

(o) Adhere to all Centers for Disease Control and Prevention, Standard Precautions.

(p) Ensure that all instruments that come in direct contact with client's skin are handled using gloves.

(3) A licensee must wear eye goggles, shields or a mask if splattering is possible while providing services.

(4) All substances must be dispensed from containers in a manner to prevent contamination of the unused portion. Single use tubes or containers and applicators shall be discarded following the service.

(5) Cross contaminating from touch or air particulates in any procedure area which comes in direct contact with client is prohibited.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 10-2012, f. & cert. ef. 6-25-12; HLA 15-2012(Temp), f. & cert. ef. 10-15-12 thru 4-12-13

331-915-0075

Standards for Client Services for Tattooing

(1) A licensee must wash hands in accordance with Subsection (2) of this rule:

(a) Prior to donning gloves to set-up of instruments used for conducting a tattoo procedure;

(b) Immediately prior to donning gloves to perform a tattoo procedure;

(c) Immediately after removing gloves at the conclusion of performing a tattoo procedure and after removing gloves at the conclusion of procedures performed in the sterilization area;

(d) When leaving the work area;

(e) When coming in contact with blood or bodily fluids;

(f) Before and after performing the following acts not limited to eating, drinking, smoking, applying lip cosmetics or lip balm, handling contact lenses, or using the bathroom; or

(g) When hands are visibly soiled.

(2) Hand washing must include thoroughly washing the hands in warm, running water with liquid soap using friction on all surfaces of the hands and wrists, then rinsing hands and drying hands with a clean, disposable paper towel, or by using an antibacterial hand sanitizer by using friction on all surfaces of the hands and wrists.

(3) A new pair of disposable gloves must be worn during the treatment of each client;

(4) A minimum of one pair of disposable gloves must be used for each of the following stages of the tattooing procedure:

(a) Set-up of instruments used for conducting tattooing procedures and skin preparation of the tattooing procedure area;

(b) The tattooing procedure and post-procedure teardown; or

(c) Cleaning and disinfection of the procedure area after each use or between clients.

(5) Once gloves have been removed, they must be disposed of immediately and hand washing instructions listed in Subsection (2) of this rule must be followed.

(6) Torn or perforated gloves must be removed immediately, and hand washing instructions listed in Subsection (2) of this rule must be followed and gloves changed following hand washing.

(7) Disposable gloves must be removed before leaving the area where tattoo procedures are performed.

(8) When a licensee leaves the tattooing procedure area in the middle of a tattooing procedure, gloves must be removed before leaving the procedure area, hand washing instructions listed in Subsection

(2) of this rule must be followed and a new pair of gloves put on when returning to the procedure area.

(9) The use of disposable gloves does not preclude or substitute for hand washing instructions listed in subsection (2) of this rule.

(10) A client's skin must be thoroughly cleaned with an antiseptic solution.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 10-2012, f. & cert. ef. 6-25-12; HLA 15-2012(Temp), f. & cert. ef. 10-15-12 thru 4-12-13

331-915-0080

Approved Sterilization Standards for Tattooing

(1) Needles must be single use, used on one client, then properly disposed of in a approved sharps container defined under OAR 331-915-0000.

(2) All non-sterilized instruments or reusable instruments that come in direct contact with a client's skin or are exposed to blood or bodily fluid must be cleaned and sterilized before use on a client or re-use on another client.

(3) New gloves must be worn during any sterilization procedure.

(4) The cleaning and sterilization process listed in subsection (5) of this rule is not required if single-use prepackaged sterilized instruments, obtained from suppliers or manufacturers are used.

(5) Approved cleaning and sterilization process for non-sterilized instruments or reusable instruments includes the following ordered method after each use:

(a) Place non-sterilized instruments or reusable instruments in an ultrasonic cleaner filled with an appropriate ultrasonic solution including but not limited to an enzymatic cleaner. The ultrasonic unit must be used according to the manufacturer's instructions. The ultrasonic unit must operate at 40 to 60 kilohertz. The ultrasonic cleaner must remain covered when in use;

(b) Remove non-sterilized instruments or reusable instruments from the ultrasonic unit. Clean non-sterilized instruments or reusable instruments by manually brushing or swabbing visible foreign matter and rinsing the instruments with warm water and an appropriate detergent solution to remove blood and bodily fluids;

(c) Rinse, air dry, and individually packaged, all instruments in sterilization pouches that includes use of a chemical indicator strip to assure sufficient temperature during each sterilization cycle, the date the sterilization was performed must be applied to the sterilization pouch;

(d) Individually packaged non-sterilized instruments or reusable instruments must be sterilized by using an autoclave sterilizer, steam or chemical, registered and listed with the FDA;

(e) A steam sterilization integrator must be used to monitor the essential conditions of steam sterilization for each autoclaved load or cycle. Results must be recorded in a log book for each sterilization cycle. Each steam sterilization integrator must indicate the date the sterilization cycle took place. Steam sterilization integrators must be kept for a minimum of sixty days.

(f) After sterilization, the sterilized instruments must be stored in a dry, disinfected, closed cabinet or other tightly-covered container reserved for the storage of such instruments.

(6) Use of a biological monitoring system ("spore tests") must be done at least once a month, verified through an independent laboratory, to assure all microorganisms have been destroyed and sterilization achieved.

(7) The ultrasonic unit listed in subsection (5)(a) of this rule must be used, cleaned, and maintained in accordance with manufacturer's instructions and a copy of the manufacturer's recommended procedures for the operation of the ultrasonic unit must be kept on file at the body art facility.

(8) All sterilization pouches with indicator strips listed in subsection (5)(c) of this rule must contain a chemical/temperature and/or humidity sensitive tapes, strips or pellets for monitoring each sterilization cycle.

(9) Sterilization pouches with indicator strips listed in subsection (5)(c) of this rule and steam sterilization integrators listed in (5)(e) of this rule must be available at all times for inspection by the Agency.

(10) Biological spore test results listed in subsection (6) of this rule must be immediately available at all times for inspection by the Agency and kept at facility premises for a minimum of two years.

(11) The autoclave listed in subsection (5)(d) must be used, cleaned, and maintained in accordance with manufacturer's instructions and a copy of the manufacturer's recommended procedures for the operation of the autoclave must be kept on file at the body art facility.

(12) The expiration date for sterilized instruments is one year from the date of sterilization unless the integrity of the package is compromised.

(13) Sterilized instruments may not be used if the package integrity has been breached, is wet or stained, or the expiration date has exceeded without first meeting the requirements listed in Subsection (5) of this rule.

(14) All sterilized instruments used in tattooing procedures must remain stored in sterile packages and in a dry, disinfected, closed cabinet or other tightly-covered container reserved for the storage of such instruments until just prior to the performance of a tattooing procedure.

(15) If a biological spore test listed in subsection (6) of this rule, result is positive, a licensee must discontinue the use of that sterilizer (autoclave) until it has been serviced and a negative spore test has been recorded before putting that sterilizer back into service. Until a negative spore test has been received, the licensee must:

(a) Use an alternative sterilizer (autoclave);

(b) Use only sterilized instruments that have a sterilization date on or before the date before the last negative spore test was recorded; or

(c) Use only single use instruments.

(16) Following a negative spore test instruments which were sterilized following the receipt of the negative spore test must be repackaged and sterilized pursuant to subsection (5) of this rule, before use.

(17) Following a negative spore test the licensee or facility must contact all clients in writing who may have received services prior to receiving the negative spore test results.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 10-2012, f. & cert. ef. 6-25-12

331-915-0085

Client Records and Information for Tattooing

(1) A licensee is responsible for maintaining and keeping copies of all client records. If client records are maintained by the facility the facility owner must provide the licensee with copies of those client records upon request. The record must include the following for each client:

(a) Name, address, telephone number and date of birth of client;

(b) Date of each service, procedure location on the body and type of service performed on client;

(c) Name and license number of the licensee providing service;

(d) Special instructions or notations relating to the client's medical or skin conditions including but not limited to diabetes, cold sores and fever blisters, psoriasis or eczema, pregnancy or breast-feeding/nursing.

(e) Complete list of the client's sensitivities to medicines or topical solutions;

(f) History of the client's bleeding disorders;

(g) Description of complications during procedure(s);

(h) Signature from the client that they have received the following information in writing and verbally:

(A) All information related to the tattooing service including possible reactions, side effects and potential complications of the service and consent to obtaining the tattooing service; and

(B) After care instructions including care following service, possible side effects and complications and restrictions.

(2) A licensee may obtain advice from physicians regarding medical information needed to safeguard client and licensee. Advice from the physician must be documented in the client record.

(3) A licensee must obtain proof of age for all clients; a copy of a government issued photographic identification must be included in the client record.

(4) A physician may authorize or prescribe a tattoo service be performed on a client who is a minor pursuant to OAR 331-915-0065. Written authorization or prescription from the physician is required. The physician authorization or prescription must be submitted to the licensee by the physician prior to tattooing the minor. A copy of the minor's photographic identification must be included in the client record.

(5) For the purpose of Subsection (1) through (4) of this rule records must be maintained at on the facility premises for a minimum of three years and must be made immediately available to the agency upon request.

(6) Client records must be typed or printed in a legible format. Client records, which are not readable by the Agency, will be treated as incomplete.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 10-2012, f. & cert. ef. 6-25-12; HLA 15-2012(Temp), f. & cert. ef. 10-15-12 thru 4-12-13

DIVISION 920

DERMAL IMPLANTING AND SCARIFICATION STANDARDS

331-920-0000

Dermal Implanting Prohibitions

Dermal implanting services defined under ORS 690.350 are prohibited until education and training programs can be implemented.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 15-2012(Temp), f. & cert. ef. 10-15-12 thru 4-12-13

331-920-0005

Scarification Prohibited

Scarification services defined under ORS 690.350 are prohibited until education and training programs can be implemented.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 15-2012(Temp), f. & cert. ef. 10-15-12 thru 4-12-13

DIVISION 925

FACILITY LICENSING, RENEWAL AND STANDARDS

331-925-0000

Facility License

(1) A location, where services are performed in a field of practice must be a licensed facility defined under ORS 690.350 and licensed under 690.365.

(2) The holder of a facility license must be a natural person.

NOTE: A natural person is a living individual human being. The facility license holder may be a facility owner, facility manager, or any other natural person.

(3) A facility license is valid for one year and becomes inactive on the last day of the month one year from the date of issuance.

(4) A facility license is not transferable; the license is not transferable from person-to-person or from location to location. If an existing facility moves or relocates to a new physical address, the facility license holder must submit a new application and meet requirements of OAR 331-925-0005. A natural person may hold more than one facility license, but must submit a separate application, pay required fees and qualify for a facility license for each location.

(5) An electrology, body piercing or tattoo facility licensed before January 1, 2012, are valid only for the fields of practice for which

those licenses were issued. In order to add additional fields of practice the owner must apply and qualify for a new body art facility license pursuant to OAR 331-925-0005.

(6) A facility must adhere to all standards within OAR chapter 331, division 930.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-925-0005

Application Requirements for Facility Licensure

A facility license may be issued if the applicant:

(1) Meets the requirements of OAR 331 division 30;

(2) Submits the following:

(3) A completed application form prescribed by the agency, which must contain the information listed in OAR 331-030-0000 and be accompanied by payment of the required fees;

(4) Submit proof of being 18 years of age documentation may include identification listed under OAR 331-030-0000,

(5) Provides a map or directions to the facility if it is located in a rural or isolated area;

(6) Provides a list of licensees providing services in the facility.

(7) Proof of a current registration as required by Secretary of State, Corporations Division pursuant to ORS 648.007;

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-925-0010

Temporary Facility License

(1) A temporary facility license holder defined under ORS 690.350 and licensed under 690.365, may perform services in a field of practice under 690.350.

(2) The holder of a temporary facility license must be a natural person.

(3) A temporary facility license is valid for a limited time not to exceed 15 consecutive calendar days, at settings such as fairs, carnivals or bazaars.

(4) A facility must adhere to all standards within OAR chapter 331, division 930.

(5) A temporary facility license is not an event facility license pursuant to OAR 331-925-0030 which is comprised of individual booths where services in a field of practice are performed.

(6) If a facility owner licensed under OAR 331-925-0000 intends to operate a facility on a limited basis, away from the facility address on file with the Agency, they must obtain a temporary facility license.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-925-0015

Application Requirements for Temporary Facility License

To be issued a temporary facility license the applicant must:

(1) Meets the requirements of OAR 331 division 30;

(2) Submit the following:

(3) A completed application form prescribed by the Agency, which must contain the information listed in OAR 331-030-0000 and be accompanied by payment of the required fees;

(4) Proof of being 18 years of age documentation may include identification listed under OAR 331-030-0000,

(5) A map or directions to the facility if it is located in a rural or isolated area;

(6) A list of licensees providing services in the facility.

(7) A current registration as required by Secretary of State, Corporations Division pursuant to ORS 648.007;

(8) A current copy of the Assumed Business Name (ABN) filing if applicant is operating under an assumed business name prior to applying for a facility license.

NOTE: ABN is not required if business includes the real and true name of each owner. Refer to Secretary of State, Corporations Division under ORS 648.005 through 648.990.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-925-0020

Mobile Facility License

(1) Mobile facility license defined under ORS 690.350 means an authorization issued under 690.365 to operate a facility outside of or away from a permanent physical location within an approved enclosed transportable vehicle, such as recreational vehicles or trailers, which has the ability to transport the business operation to multiple locations in the State of Oregon during specific approved periods of time.

(2) A mobile facility is limited to no more than 15 consecutive calendar days at one physical location.

(3) A mobile facility must adhere to all standards within OAR chapter 331, division 930.

(4) The holder of a mobile facility license must be a natural person.

[NOTE: a natural person is a living individual human being. The mobile facility license holder may be a facility owner, facility manager, or any other natural person.]

(5) A mobile facility license is not transferable; the license is not transferable from person-to-person. Requirements under OAR 331-925-0025 must be met.

(6) A mobile facility license holder must comply with the following requirements:

(a) Submit written notification on a form prescribed by the Agency for each new physical location where services will be provided in a field of practice. The notification form must be received by the Agency at least 24 hours before services are performed at the new physical location and may be submitted by regular United States Postal Service or by electronic mail or in person at the office.

(b) Remain stationary while services in a field of practice are performed;

(c) Provide each client, verbally and in writing, with the mobile facility name, mobile facility license number, license number and name of the person providing service, permanent address on file with the Agency and telephone number; and

(d) Must display the mobile facility name on file with the Agency on the outside of the mobile facility which is easily visible from the street.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-925-0025

Application Requirements for Mobile Facility License

To be issued a mobile facility license the applicant must:

(1) Meet the requirements of OAR 331 division 30;

(2) Submit the following:

(3) A completed application form prescribed by the agency, which must contain the information listed in OAR 331-030-0000 and be accompanied by payment of the required fees;

(4) Documentation showing proof of being 18 years of age documentation may include identification listed under OAR 331-030-0000;

(5) A map or directions to the facility if it is located in a rural or isolated area;

(6) A list of licensees providing services in the facility.

(7) A current registration as required by Secretary of State, Corporations Division pursuant to ORS 648.007;

(8) A current copy of the Assumed Business Name (ABN) filing if applicant is operating under an assumed business name prior to applying for a facility license.

NOTE: ABN is not required if business includes the real and true name of each owner. Refer to Secretary of State, Corporations Division under ORS 648.005 through 648.990.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415
 Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35
 Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-925-0030

Event Facility License

(1) Event facility license defined under ORS 690.350 means an authorization issued under 690.365 to operate a facility outside and away from a permanent physical location for specific approved period of time not to exceed 15 consecutive calendar days, for convention, educational, demonstration and exhibition purposes.

(2) An event facility is comprised of individual booths where services in a field of practice are provided.

(3) A representative of the event facility must be available at all times when services are being provided.

(4) An event facility must be inspected by the Agency before services are provided in a field of practice.

(5) An event facility must adhere to all standards within OAR chapter 331, division 930.

(6) Event facility owners must provide a hot and cold running water station for every 10 licensed individuals in a field of practice.

(7) The holder of an event facility license must be a natural person.

NOTE: a natural person is a living individual human being. The event facility license holder may be an event facility owner, event facility manager, or any other natural person.

(8) An event facility license is not transferable; the license is not transferable from person-to-person. Requirements under OAR 331-925-0035 must be met.

(9) For the purpose of this rule a "booth" is 10 feet by 10 feet or 100 square feet of floor space and limited to two licensees.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415
 Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35
 Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-925-0035

Application Requirements for an Event Facility License

To be issued an event facility license the applicant must:

(1) Meet the requirements of OAR 331 division 30;

(2) Submit completed application form prescribed by the Agency and payment of the required application fees which must be received by the Agency 30 days before the start of the event.

(3) Submit documentation showing proof of being 18 years of age documentation may include identification listed under OAR 331-030-0000;

(4) Provide a map or directions to the facility if it is located in a rural or isolated area;

(5) Submit current registration as required by Secretary of State, Corporations Division pursuant to ORS 648.007;

(6) Submit current copy of the Assumed Business Name (ABN) filing if applicant is operating under an assumed business name prior to applying for a facility license.

(7) Pay all licensing fees.

NOTE: ABN is not required if business includes the real and true name of each owner. Refer to Secretary of State, Corporations Division under ORS 648.005 through 648.990.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415
 Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35
 Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-925-0040

Renewal of a Facility or Mobile Facility License

(1) A licensee is subject to the provisions of OAR chapter 331, division 30 regarding the renewal of a license and provisions regarding authorization to practice, identification, and requirements for issuance of a duplicate license.

(2) Facility license renewal under OAR 331-925-0005 or 331-925-0025 this rule is valid for one year.

(3) **LICENSE RENEWAL:** To avoid delinquency penalties, a facility or mobile facility license renewal must be made prior to the license entering inactive status. The licensee must submit the following:

(a) Renewal application form;

(b) Payment of required renewal fee pursuant to 331-940-0000;

(4) **INACTIVE LICENSE RENEWAL:** A facility or mobile facility license may be inactive for up to three years. A licensee who is inactive is not authorized to practice. When renewing after entering inactive status, the licensee holder must submit the following:

(a) Renewal application form;

(b) Payment of delinquency and license fees pursuant to OAR 331-940-0000;

(5) **EXPIRED LICENSE:** A facility or mobile facility license that has been inactive for more than three years is expired and the license holder must reapply and meet the requirements listed in 331-925-0005 or 331-925-0025.

(6) **LICENSE RENEWAL — FACILITY LICENSE ISSUED PRIOR TO JANUARY 1, 2012.** Electrology, body piercing and tattoo facilities and mobile facilities licensed before January 1, 2012 must apply and qualify for a new body art facility license pursuant to OAR 331-925-0005 or 331-925-0025 on or before the electrology, body piercing or tattoo license becomes inactive. The applicant must designate a natural person as the facility or mobile license holder.

(7) If a facility changes ownership, the new owner must apply for a new facility license.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415
 Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35
 Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-925-0045

Posting Requirements

Licensees are subject to the requirements of OAR 331-030-0020.

(1) All facility licenses must be posted in public view.

(2) All facility license holders must post the most recent inspection certificate in public view on the facility premises.

(3) Each booth within an event facility must post the inspection certificate in public view within the booth.

(4) A licensee in a field of practice performing services in any facility must post a current active license in public view. A licensee in a field of practice may temporarily conceal the address printed on the license document with a covering that is removable.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415
 Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35
 Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-925-0050

Facility Standards

Facility standards apply to all licensees under ORS 690.350 unless otherwise specified by rule.

(1) A facility license holder licensed under OAR chapter 331, division 925 must:

(a) Require each individual working within the facility premises providing services in a field of practice be licensed with the Agency;

(b) Provide a screened or separated area away from public access and viewing, isolated from a reception or waiting area, when services are conducted upon breasts, nipples, genitals or buttocks;

(c) Allow the Agency's representative to inspect the facility or conduct an investigation. Obstructing or hindering the normal progress of an investigation or the inspection, threatening or exerting physical harm, or enabling another individual or employee to impede an investigation or inspection may result in disciplinary action;

(d) Ensure waste from toilets or lavatories be discharged directly into a public sewer or by a method meeting the requirements of ORS Chapter 454;

(e) Have a sterilization area separated from public areas, service areas and restrooms where decontamination and sterilization of reusable instruments is performed. This rule does not apply to electrology license holders and temporary earlobe piercing license holders.

(f) All surfaces in areas where decontamination and sterilization of reusable instruments are performed must be non-porous;

(g) Hand washing accommodations must be provided in work areas where licensees are exposed to hazardous materials, which will have a harmful effect on or be absorbed through the skin if the contamination is not removed;

(h) Maintain washing accommodations in a clean and sanitary condition;

(i) Ensure all floors, walls and procedure surfaces including counters, tables, and chairs are easily cleanable, non-absorbent and non-porous where services are provided;

(2) When body piercing or tattoo services are provided in a cosmetology facility, body piercing or tattoo services must be separated from cosmetology services by use of a solid barrier to prevent contact with irritants. Electrology services are excluded from this rule.

(3) The facility must comply with all applicable rules and regulations of the Agency and other federal, state, county and local agencies. This includes the following:

(a) Building, fire, plumbing and electrical codes, and with exit and fire standards established by the Building Codes Agency, the Office of the State Fire Marshal;

(b) Oregon Indoor Clean Air Act as it appears in ORS 433.835 through 433.875.

(c) Occupational Safety and Health Act Blood Borne Pathogens Standards under 29 CFR 1910.1030 this includes but is not limited to: individuals providing services in a field of practice, facility owners; and other employees on the facility premises.

(d) ORS Chapter 654 and the Oregon Safe Employment Act if an employee/employer relationship exists.

(e) All applicable Occupational Safety and Health Act standards if an employee/employer relationship exists.

Stat. Auth.: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, & 345

Stats. Implemented: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415

Hist.: HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-925-0055

Standards for Facilities Located in Residence

A facility located in a residence must comply with all standards listed in OAR chapter 331, division 925 in addition to the following criteria, unless otherwise specified by rule:

(1) Have an identifying house number or a sign, which is easily visible from the street and indicates the location of the facility;

(2) Be equipped with the structures, accommodations, and equipment which the Agency requires for all facilities; and

(3) The living area of the home must be separated from the facility by solid walls extending from floor to ceiling with any connecting doors kept closed while the facility is in actual operation.

Stat. Auth.: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415, & 345

Stats. Implemented: ORS 676.607, 676.615, 676.625, 690.365, 690.371, 690.385, 690.390, 690.405, 690.407, 690.410, 690.415

Hist.: HLA 3-2012(Temp), f. & cert. ef. 3-1-12 thru 6-25-12; HLA 10-2012, f. & cert. ef. 6-25-12

DIVISION 940

BOARD OF BODY ART — FEES

331-940-0000

Fees

(1) Applicants and licensees are subject to the provisions of OAR 331-010-0010 and 331-010-0020 regarding the payment of fees, penalties and charges.

(2) Fees established by the Oregon Health Licensing Agency are as follows:

(a) Application:

(A) Standard Body Piercing — \$50.

(B) Specialty Body Piercing Level 1 — \$50.

(C) Specialty Body Piercing Level 2 — \$50.

(D) Electrology — \$50.

(E) Tattoo — \$50.

(F) Reciprocity Per Field of Practice — \$150.

(G) Facility — \$100.

(H) Mobile Facility — \$100.

(I) Event Facility — \$100.

(J) Temporary Facility License — \$100.

(K) Temporary Practitioner Per Field of Practice — \$50.

(L) Standard Body Piercing Trainee — \$50.

(M) Ear Lobe Piercing Temporary — \$25.

(b) Examination:

(A) Written — \$50.

(B) Practical — \$100.

(c) Original Issuance of License:

(A) Standard Body Piercing Trainee — \$50.

(B) Standard Body Piercing — \$50.

(C) Specialty Body Piercing Level 1 — \$50.

(D) Specialty Body Piercing Level 2 — \$50.

(E) Electrology — \$25.

(F) Tattoo — \$50.

(G) License for a Field of Practice by Reciprocity — \$50.

(H) Facility — \$150.

(I) Mobile Facility — \$150.

(J) Event Facility:

(i) Up to 100 booths: \$725.

(ii) 101 to 200 booths: \$1,450.

(iii) 201 to 300 booths: \$2,175.

(iv) 301 to 400 booths: \$2,900.

(v) 401 to 500 booths: \$3,625.

(K) Temporary Practitioner Per Field of Practice — \$20.

(L) Temporary Facility — \$50.

(M) Earlobe Piercing Temporary — \$25.

(d) Renewal of License Online:

(A) Standard Body Piercing — \$45.

(B) Electrology — \$20.

(C) Tattoo — \$45.

(D) Temporary Earlobe — \$20.

(E) Body Art Facility — \$125.

(F) Mobile Facility License — \$125.

(e) Renewal of License Over-the-Counter or Through the Mail:

(A) Standard Body Piercing Trainee — \$50.

(B) Standard Body Piercing — \$50.

(C) Specialty Body Piercing Level 1 — \$50.

(D) Specialty Body Piercing Level 2 — \$50.

(E) Electrology — \$25.

(F) Tattoo — \$50.

(G) Temporary Earlobe — \$25.

(H) Temporary Practitioner Per Field of Practice — \$20.

(I) Body Art Facility — \$150.

(J) Mobile Facility License — \$150.

(f) Other administrative fees:

(A) Delinquency — \$50 per year, up to three years.

(B) Replacement License — \$25.

(C) Duplicate License — \$25 per copy with maximum of three.

(D) Affidavit of Licensure — \$50.

(E) Information Packets — \$10.

(F) Administrative Processing Fee — \$25.

(3) Individuals taking the body piercing written and practical examination from January 1, 2012 through June 30, 2013, will have their examination fees waived as long as funding remains available.

(4) Facility application and licensing fees for facilities licensed prior to January 1, 2012, will have their application and licensing fees waived between January 1, 2012 and June 30, 2013 or as long as funding remains available.

(5) Practitioners who were permanently licensed prior to January 1, 2012, will have their renewal fee waived between January 1, 2012 and June 30, 2013 or as long as funding remains available.

Stat. Auth.: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 4-2012(Temp), f. & cert. ef. 3-5-12 thru 9-1-12; HLA 11-2012, f. & cert. ef. 7-25-12

DIVISION 950

BOARD OF BODY ART CIVIL PENALTIES

331-950-0010

Schedule of Penalties for Facility License Violations

The Agency has adopted the following presumptive penalty schedule for the 1st, 2nd, and 3rd violation of facility license laws and rules. This schedule applies, except at the discretion of the agency pursuant to OAR 331-020-0060. For the 4th and subsequent offenses, the provisions of OAR 331-020-0060 apply.

(1) Operating or purporting to operate a facility without a valid facility license is a violation of ORS 690.360(d):

- (a) Never licensed:
 - (A) 1st offense: \$500;
 - (B) 2nd offense: \$1000;
 - (C) 3rd offense: \$2500
- (b) Inactive or expired license:
 - (A) 1st offense: \$200;
 - (B) 2nd offense: \$500;
 - (C) 3rd offense: \$1,000
- (c) License or Authorization, Suspended or Revoked:
 - (A) 1st offense: \$2,500;
 - (B) 2nd offense: \$5,000;
 - (C) 3rd offense: Monetary penalty and any other actions allowed by law including revocation of suspended authorization to practice and refusal to issue a new authorization to practice to a revoked authorization holder.

(2) Allowing an unlicensed individual or revoked licensee to practice in a field of practice is a violation of ORS 690.360(f) or OAR 331-925-0050(1)(a)

(a) Allowing an employee or unlicensed individual or revoked licensee:

- (A) 1st offense: \$1000;
- (B) 2nd offense: \$2,500;
- (C) 3rd offense: Monetary penalty and any other actions allowed by law including revocation of suspended authorization to practice and refusal to issue a new authorization to practice to a revoked authorization holder.

(b) Allowing an Employee or individual with inactive, suspended, or expired license:

- (A) 1st offense: \$200
- (B) 2nd offense: \$500
- (C) 3rd offense: \$1000

(3) Failing to allow an Agency enforcement officer to inspect the facility when it is open for business is a violation of OAR 331-925-0050(1)(c) and will result in monetary penalties and any other actions allowed by law.

- (a) 1st offense: \$1500
- (b) 2nd offense: \$2500
- (c) 3rd offense: \$5000

(4) Operating or purporting to operate an event facility without first obtaining a current valid event facility permit is a violation of ORS 690.360(d)

- (a) \$5000 per violation

(5) Failing to meet the specifications and standards required under OAR 331-925-0005(3) in a facility may result in an emergency suspension of the facility license until the violation is corrected.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690, 405, 690.407, 690.410 & 690.415
 Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35
 Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-950-0020

Schedule of Penalties for Practitioner Violations

The Agency has adopted the following presumptive penalty schedule for the 1st, 2nd, and 3rd violation of practitioner licensing laws and rules. This schedule applies, except at the discretion of the agency pursuant to OAR 331-020-0060. For the 4th and subsequent offenses, the provisions of OAR 331-020-0060 apply.

(1) Performing, attempting to perform, or purporting to perform services in a field of practice without a license to perform services in that field of practice of ORS 690.360(1)(a) or (c).

(a) License or authorization never held:

- (A) 1st offense: \$2,500;
- (B) 2nd offense: \$5,000;
- (C) 3rd offense: Monetary penalty or any other actions allowed by law including refusal to issue a new authorization to practice.

(b) License or authorization inactive or expired:

- (A) 1st offense: \$200;
- (B) 2nd offense: \$500;
- (C) 3rd offense: \$1000.

(c) License or authorization suspended or revoked:

- (A) 1st offense: \$2,500;
- (B) 2nd offense: \$5,000;
- (C) 3rd offense: Monetary penalty or any other actions allowed by law including revocation of suspended authorization to practice and refusal to issue a new authorization to practice to a revoked authorization holder.

(2) Performing or attempting to perform services in a field of practice outside a licensed facility is a violation of ORS 690.360(1)(b)

- (a) 1st offense: \$500;
- (b) 2nd offense: \$1000;
- (c) 3rd offense: \$2,500

(4) A body piercing trainee license holder performing body piercing when not under the direct supervision of their supervisor is a violation of OAR 331-900-0020 for standard body piercing; or 331-905-0011 or 331-905-0013 for specialty body piercing:

- (a) 1st offense: \$500;
- (b) 2nd offense: \$1,000;
- (c) 3rd offense: \$2,500.

(5) Failing, as a supervisor, to provide supervision to their trainee in accordance with OAR 331-900-0050 for standard body piercing; OAR 331-905-0052 for specialty level one body piercing, 331-905-0058 for specialty level two body piercing in addition to any other disciplinary actions, an approved supervisor's authorization to supervise may be withdrawn by the Agency:

- (a) 1st offense: \$500;
- (b) 2nd offense: \$1,000;
- (c) 3rd offense: \$2,500.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690, 405, 690.407, 690.410 & 690.415
 Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35
 Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-950-0030

Schedule of Penalties for License Violations

The Agency has adopted the following presumptive penalty schedule for the 1st, 2nd, and 3rd violation of license laws and rules. This schedule applies, except at the discretion of the agency pursuant to OAR 331-020-0060. For the 4th and subsequent offenses, the provisions of OAR 331-020-0060 apply.

(1) Altering with fraudulent intent or fraudulent use of a license or authorization issued by the agency is a violation of ORS 690.360(1)(i) or 690.360(1)(j):

- (a) 1st offense: \$1,500;
- (b) 2nd offense: \$3,500;
- (c) 3rd offense: \$5,000.

(2) Failing to post a valid license or authorization issued by the agency or the most recent inspection certificate in public view is a violation of OAR 331-925-0045

- (a) 1st offense: \$100
- (b) 2nd offense: \$200
- (c) 3rd offense: \$500

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690, 405, 690.407, 690.410 & 690.415
 Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35
 Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-950-0040

Schedule of Penalties for Board of Body Art Standards Violations

The Agency has adopted the following presumptive penalty schedule for the 1st, 2nd, and 3rd violation of Board of Body Art Standards Violations laws and rules. This schedule applies, except at the

discretion of the agency pursuant to OAR 331-020-0060. For the 4th and subsequent offenses, the provisions of 331-020-0060 apply.

(1) Any violation of a Mobile Facility License listed in OAR 331-925-0020:

- (a) 1st offense: \$500;
- (b) 2nd offense: \$1,000;
- (c) 3rd offense: \$2,500.

(2) Any violation of a facility standard listed in OAR 331-925-0050(1) or (2) excluding (1)(a) and (1)(c):

- (a) 1st offense: \$500;
- (b) 2nd offense: \$1,000;
- (c) 3rd offense: \$2,500.

(3) Any violation of a Standard for Facilities Located in Residence listed in OAR 331-925-0055:

- (a) 1st offense: \$300;
- (b) 2nd offense: \$500;
- (c) 3rd offense: \$1,000.

(4) Any violation of a General Standard listed in OAR 331-900-0097 for earlobe piercing; 331-900-0115 for standard body piercing; 331-905-0095 for specialty body piercing; 331-910-0080 for electrology; or 331-915-0070 for tattooing;

- (a) 1st offense: \$500;
- (b) 2nd offense: \$1,000;
- (c) 3rd offense: \$2,500.

(5) Any violation of Standards for Client Services listed in OAR 331-900-0098 for earlobe piercing; 331-900-0120 for standard body piercing; 331-905-0100 for specialty body piercing; 331-910-0070 for electrology; or 331-915-0075 for tattooing:

- (a) 1st offense: \$500;
- (b) 2nd offense: \$1,000;
- (c) 3rd offense: \$2,500.

(6) Failing to sterilize all instruments that come in direct contact with a client's skin or are exposed to blood or bodily fluid or use single use needles is a violation of OAR 331-900-0125(1) and (2) for body piercing; 331-905-105(1) and (2) for specialty body piercing; 331-910-0075(1) and (2) for electrology; or 331-915-0080(1) and (2) for tattooing;

- (a) 1st offense: \$1,000;
- (b) 2nd offense: \$2,500;

(c) 3rd offense: Monetary penalty and any other actions allowed by law including revocation of suspended authorization to practice and refusal to issue a new authorization to practice to a revoked authorization holder

(7) Failing to properly use approved sterilization modes or procedures is a violation of OAR 331-900-0125 excluding (1), (2), (9) and (10) for body piercing; 331-905-0105 excluding (1), (2), (9) and (10) for specialty body piercing; 331-910-0075 excluding (1), (2) and (10) for electrology; or 331-915-0080 excluding (1), (2), (9) and (10) for tattooing;

- (a) 1st offense: \$1,000;
- (b) 2nd offense: \$2,500;

(c) 3rd offense: Monetary penalty and any other actions allowed by law including revocation of suspended authorization to practice and refusal to issue a new authorization to practice to a revoked authorization holder

(8) Failing to maintain monthly Biological test results, chemical indicator strips and steam sterilization integrators on the premises of the facility or allow an enforcement officer access to review those records immediately upon request is a violation of OAR 331-900-0125 (9) or (10) for body piercing; 331-905-0105(9) and (10) for specialty body piercing; 331-910-0075(10) for electrology; or 331-915-0080(9) and (10) for tattooing:

- (a) 1st offense: \$500;
- (b) 2nd offense: \$1,000;
- (c) 3rd offense: \$2,500.

(9) Failing to collect and maintain complete client records for each client on the premises of the facility or allow an enforcement officer access to review client records immediately upon request is a violation of OAR 331-900-0099 for earlobe piercing; 331-900-0130 for standard body piercing; 331-905-0110 for specialty body piercing; 331-910-0085 for electrology; or 331-915-0085 for tattooing:

- (a) 1st offense: \$500;
- (b) 2nd offense: \$1,000;
- (c) 3rd offense: \$2,500.

- (a) 1st offense: \$500;
- (b) 2nd offense: \$1,000;
- (c) 3rd offense: \$2,500.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-950-0050

Schedule of Penalties for Body Piercing Standards and Prohibited Services

The Agency has adopted the following presumptive penalty schedule for the 1st, 2nd, and 3rd violation of Body Piercing Standards and Prohibited Services laws and rules. This schedule applies, except at the discretion of the agency pursuant to OAR 331-020-0060. For the 4th and subsequent offenses, the provisions of OAR 331-020-0060 apply.

(1) Violation of an Earlobe Piercing Standard by is a violation of OAR 331-900-0095:

- (a) 1st offense: \$500;
- (b) 2nd offense: \$1,000;
- (c) 3rd offense: \$2,500.

(2) Providing a piercing service that is prohibited is a violation of OAR 331-900-0100 excluding (1)(c) for standard body piercing or OAR 331-905-0090 excluding (1)(c) for specialty body piercing:

- (a) 1st offense: \$1,000;
- (b) 2nd offense: \$2,500;

(c) 3rd offense: Monetary penalty and any other actions allowed by law including revocation of suspended authorization to practice and refusal to issue a new authorization to practice to a revoked authorization holder.

(3) Performing, attempting to perform, or purporting to perform a piercing service that is prohibited under OAR 331-900-0100(1)(c) for standard body piercing or OAR 331-905-0090(1)(c) for specialty body piercing; or a piercing service listed as a specialty level one or specialty level two body piercing without a specialty level one or specialty level two body piercing license is a violation of ORS 690.360(1)(a) or (c):

- (a) 1st offense: \$2,500;
- (b) 2nd offense: \$5,000;

(c) 3rd offense: Monetary penalty or any other actions allowed by law including refusal to issue a new authorization to practice.

(4) Violation of an initial jewelry piercing standard is a violation of OAR 331-900-0105 for standard body piercing or 331-905-0120 for specialty body piercing:

- (a) 1st offense: \$500;
- (b) 2nd offense: \$1,000;
- (c) 3rd offense: \$2,500.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-950-0060

Schedule of Penalties for Electrologist Practice Restrictions

The Agency has adopted the following presumptive penalty schedule for the 1st, 2nd, and 3rd violation of Electrologist Practice Restrictions laws and rules. This schedule applies, except at the discretion of the agency pursuant to OAR 331-020-0060. For the 4th and subsequent offenses, the provisions of OAR 331-020-0060 apply.

(1) Performing a prohibited service is a violation of OAR 331-910-0065 excluding (4):

- (a) 1st offense: \$1,000;
- (b) 2nd offense: \$2,500;

(c) 3rd offense: Monetary penalty and any other actions allowed by law including revocation of suspended authorization to practice and

refusal to issue a new authorization to practice to a revoked authorization holder.

(2) Failing to adhere to towels or linens requirements listed in OAR 331-910-0065(4):

- (a) 1st offense: \$300;
- (b) 2nd offense: \$500;
- (c) 3rd offense: \$1,000.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 10-2012, f. & cert. ef. 6-25-12

331-950-0070

Schedule of Penalties for Tattoo Practice Standards and Prohibitions

The Agency has adopted the following presumptive penalty schedule for the 1st, 2nd, and 3rd violation of Tattoo Practice Standards and Prohibitions laws and rules. This schedule applies, except at the discretion of the agency pursuant to OAR 331-020-0060. For the 4th and subsequent offenses, the provisions of OAR 331-020-0060 apply.

(1) Violation of a Tattoo Practice Standards as listed in OAR 331-915-0065(1), (2), or (3):

- (a) 1st offense: \$500;
- (b) 2nd offense: \$1,000;
- (c) 3rd offense: \$2,500.

(2) Performing a prohibited service is a violation of OAR 331-915-0065(5):

- (a) 1st offense: \$1000;
- (b) 2nd offense: \$2,500;

(c) 3rd offense: Monetary penalty and any other actions allowed by law including revocation of suspended authorization to practice and refusal to issue a new authorization to practice to a revoked authorization holder.

Stat. Auth: ORS 345, 676.607, 676.615, 676.625, 690.365, 690.370, 690.385, 690.390, 690.405, 690.407, 690.410 & 690.415

Stats. Implemented: ORS 676.607, 676.608, 676.612, 676.615, 676.625, 690.350, 690.360, 690.365, 690.370, 690.380, 390.385, 690.390, 690.405, 690.407, 690.410, 690.415 & 2011 OL Ch. 346 § 22 & 35

Hist.: HLA 16-2011, f. 12-30-11, cert. ef. 1-1-12; HLA 10-2012, f. & cert. ef. 6-25-12

