

**Executive Committee** 

## Filed: 5/6/2009

	09600SB1483ham001 LRB096 07510 ASK 26155 a
1	AMENDMENT TO SENATE BILL 1483
2	AMENDMENT NO Amend Senate Bill 1483 by replacing
3	everything after the enacting clause with the following:
4	"Section 5. The Illinois Speech-Language Pathology and
5	Audiology Practice Act is amended by changing Section 3 and by
6	adding Section 9.3 as follows:
7	(225 ILCS 110/3) (from Ch. 111, par. 7903)
8	(Section scheduled to be repealed on January 1, 2018)
9	Sec. 3. Definitions. The following words and phrases shall
10	have the meaning ascribed to them in this Section unless the
11	context clearly indicates otherwise:
12	(a) "Department" means the Department of Financial and
13	Professional Regulation.
14	(b) "Secretary" means the Secretary of Financial and
15	Professional Regulation.
16	(c) "Board" means the Board of Speech-Language Pathology

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and Audiology established under Section 5 of this Act.

2 (d) "Speech-Language Pathologist" means a person who has
3 received a license pursuant to this Act and who engages in the
4 practice of speech-language pathology.

5 (e) "Audiologist" means a person who has received a license 6 pursuant to this Act and who engages in the practice of 7 audiology.

8 (f) "Public member" means a person who is not a health 9 professional. For purposes of board membership, any person with 10 a significant financial interest in a health service or 11 profession is not a public member.

(g) "The practice of audiology" is the application of 12 nonmedical methods and procedures for the identification, 13 measurement, testing, appraisal, prediction, habilitation, 14 15 rehabilitation, or instruction related to hearing and 16 disorders of hearing. These procedures are for the purpose of counseling, consulting and rendering or offering to render 17 18 services or for participating in the planning, directing or 19 conducting of programs that are designed to modify communicative disorders involving speech, language or auditory 20 function related to hearing loss. The practice of audiology may 21 22 include, but shall not be limited to, the following:

(1) any task, procedure, act, or practice that is
 necessary for the evaluation of hearing or vestibular
 function;

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(2) training in the use of amplification devices;

(3) the fitting, dispensing, or servicing of hearing
 instruments; and

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(4) performing basic speech and language screening tests and procedures consistent with audiology training.

5 (h) "The practice of speech-language pathology" is the 6 application of nonmedical methods and procedures for the identification, measurement, testing, appraisal, prediction, 7 habilitation, rehabilitation, and modification related to 8 9 communication development, and disorders or disabilities of 10 speech, language, voice, swallowing, and other speech, 11 language and voice related disorders. These procedures are for the purpose of counseling, consulting and rendering or offering 12 13 to render services, or for participating in the planning, directing or conducting of programs that are designed to modify 14 15 communicative disorders and conditions in individuals or 16 groups of individuals involving speech, language, voice and 17 swallowing function.

18 "The practice of speech-language pathology" shall include, 19 but shall not be limited to, the following:

(1) hearing screening tests and aural rehabilitation
 procedures consistent with speech-language pathology
 training;

(2) tasks, procedures, acts or practices that are
 necessary for the evaluation of, and training in the use
 of, augmentative communication systems, communication
 variation, cognitive rehabilitation, non-spoken language

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1	production and comprehension; and-
2	(3) the use of rigid and flexible endoscopes for the
3	sole purpose of observing and obtaining images of the
4	pharynx and larynx.
5	(i) "Speech-language pathology assistant" means a person
6	who has received a license pursuant to this Act to assist a
7	speech-language pathologist in the manner provided in this Act.
8	(Source: P.A. 94-528, eff. 8-10-05; 95-465, eff. 8-27-07.)
9	(225 ILCS 110/9.3 new)
10	(Section scheduled to be repealed on January 1, 2018)
11	Sec. 9.3. Requirements for the use of endoscopes.
12	(a) A speech-language pathologist may perform an
13	endoscopic procedure using either a rigid or flexible endoscope
14	for the sole purpose of observing and obtaining images of the
15	pharynx and larynx if all of the following requirements have
16	been met:
17	(1) If the patient has a voice disorder or vocal cord
18	dysfunction, he or she must be examined by a physician who
19	has been granted hospital privileges to perform these
20	procedures and the speech-language pathologist must have
21	received from that physician a written referral and direct
22	authorization to perform the procedure.
23	(2) If the patient has a swallowing disorder or a
24	velopharyngeal disorder, he or she must be examined by a
25	physician licensed to practice medicine in all its branches

1and the speech-language pathologist must have received2from that physician a written referral and direct3authorization to perform the procedure.

4 <u>(3) The speech-language pathologist has (i) been</u> 5 <u>granted hospital privileges to perform these procedures or</u> 6 <u>(ii) completed a hands-on university or college course, or</u> 7 <u>a hands-on seminar or workshop in endoscopy as a technique</u> 8 <u>for investigating speech and swallowing, which qualifies</u> 9 <u>for continuing education credit with the American</u> 10 <u>Speech-Language-Hearing Association (ASHA).</u>

The speech-language pathologist must send a 11 (4) written report or recorded copy of the observations 12 13 recorded during the procedure to the referring physician, 14 and if the speech-language pathologist performs the 15 procedure and observes an abnormality or the possibility of a condition that requires medical attention, the 16 speech-language pathologist shall immediately refer the 17 patient to the referring physician for examination. 18

19 (5) In no instance may the speech-language pathologist
 20 use an endoscope to perform any procedure that disrupts
 21 living tissue.

22 (b) A speech-language pathologist may use a flexible 23 endoscope for the sole purpose of observing and obtaining 24 images of the pharynx and larynx if, in addition to meeting the 25 requirements of subsection (a) of this Section, all of the 26 following requirements have been met:

1	(1) The encesh lenguage methologist has sheewed 10
1	(1) The speech-language pathologist has observed 10
2	procedures performed by either (i) a physician who has been
3	granted hospital privileges to perform these procedures or
4	<u>(ii) a speech-language pathologist who has met the</u>
5	requirements of item (3) of subsection (a) of this Section
6	and items (1) and (2) of this subsection (b) in a licensed
7	health care facility or a clinic affiliated with a
8	hospital, university, college, or ASHA-approved continuing
9	education course that has emergency medical backup and a
10	physician available or in the office of a physician who is
11	available.
12	(2) The speech-language pathologist has successfully
13	performed 25 procedures under the direct supervision of a
14	physician who has been granted hospital privileges to
15	perform these procedures; provided, however, that the
16	physician may delegate the supervision of up to 10 of the
17	25 procedures to a speech-language pathologist who has met
18	the requirements of this Section. The supervising
19	physician shall provide written verification that the
20	speech-language pathologist in training has successfully
21	completed the requirements of this item (2) demonstrating
22	the ability to perform these procedures. The
23	speech-language pathologist shall have this written
24	verification on file and readily available for inspection
25	upon request by the Board.
26	(3) The observation of the patient's function must take

1 place (i) under the supervision of a physician and (ii) in a licensed health care facility or a clinic affiliated with 2 a hospital, university, or college that has emergency 3 4 medical backup and a physician available or in the office 5 of a physician who is available. 6 (c) Nothing in this Section shall be construed to authorize 7 a medical diagnosis. (d) Nothing in this Section shall preclude the use of a 8 9 rigid or flexible endoscope for the purpose of training or 10 research done in conjunction with a speech-language pathology 11 program accredited by the Council for Academic Accreditation, provided that (i) emergency medical backup is available when 12 flexible endoscopy is performed and (ii) such training or 13 14 research is performed with the participation of either a 15 physician who has been granted hospital privileges to perform 16 these procedures or a speech-language pathologist who has met the requirements of item (3) of subsection (a) of this Section 17 and items (1) and (2) of subsection (b) of this Section. 18 (e) Nothing in this Section shall be construed to allow a 19 20 speech-language pathologist to use an anesthetic without the authorization of a physician who has been granted hospital 21 22 privileges to perform the procedure.

23 Section 99. Effective date. This Act takes effect upon 24 becoming law.".