

**Rules of**  
**Department of Economic Development**  
**Division 255—Missouri Board for Respiratory Care**  
**Chapter 5—Code of Ethics and Professional Conduct**

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**Title 4—DEPARTMENT OF  
ECONOMIC DEVELOPMENT  
Division 255—Missouri Board for  
Respiratory Care  
Chapter 5—Code of Ethics and  
Professional Conduct**

**4 CSR 255-5.010 Code of Ethics**

*PURPOSE: This rule establishes the code of ethics for respiratory care practitioners and for holders of temporary permits issued by the board.*

(1) All respiratory care practitioners and permit holders shall—

(A) Demonstrate behavior that reflects integrity, supports objectivity, and fosters trust in the profession and its professionals;

(B) Actively maintain and continually improve professional competence, and represent it accurately;

(C) Perform only those procedures or functions in which s/he is individually competent and which are within the scope of accepted and responsible practice;

(D) Respect and protect the legal and personal rights of patients, including the right to informed consent and refusal of treatment;

(E) Divulge no confidential information regarding any patient or family unless disclosure is required for responsible performance of duty, or required by law;

(F) Provide care without discrimination on any basis, with respect for the rights and dignity of all individuals;

(G) Promote disease prevention and wellness;

(H) Refuse to participate in illegal or unethical acts, or conceal illegal, unethical or incompetent acts of others;

(I) Follow sound scientific procedures and ethical principles in research;

(J) Comply with state and federal laws;

(K) Avoid any form of conduct that creates a conflict of interest, and shall follow the principles of professional ethical business behaviors;

(L) Promote the positive evolution of the profession, and health care, through improvement of the access, efficacy, and cost of patient care;

(M) Refrain from indiscriminate and unnecessary use of resources, both economical and natural, in the practice of respiratory care; and

(N) Within the limits of the law, a respiratory care practitioner or permit holder shall report to the board all knowledge of suspected violations of the laws and rules governing the practice of a respiratory care practitioner

as defined in section 334.810, RSMo, and any other applicable laws and rules.

(2) Failure of a respiratory care practitioner or permit holder to adhere to the code of ethics constitutes grounds for discipline of the license or permit.

*AUTHORITY: sections 334.800, 334.840.2, 334.850, 334.910 and 334.920, RSMo Supp. 1997.\* Emergency rule filed June 25, 1998, effective July 6, 1998, expired Feb. 25, 1999. Original rule filed June 25, 1998, effective Jan. 30, 1999.*

*\*Original authority: 334.800, RSMo 1996; 334.840, RSMo 1996; 334.850, RSMo 1996; 334.910, RSMo 1996; and 334.920, RSMo 1996.*

**4 CSR 255-5.020 Professional Conduct**

*PURPOSE: This rule defines what is considered unprofessional conduct for respiratory care practitioners and holders of temporary permits issued by the board.*

(1) Professional conduct in the practice of respiratory care shall not include:

(A) Committing any act which endangers patient health, safety or welfare;

(B) Assisting or enabling the practice of respiratory care in noneducational settings by unlicensed persons;

(C) Performance of respiratory care services that are unjustified or contraindicated;

(D) Verbal, physical, or sexual abuse of patients;

(E) Falsification or unauthorized destruction of patient records;

(F) Providing or attempting to provide diagnostic or treatment information to patient(s) that is beyond the respiratory care practitioner's or permit holder's level of training and expertise;

(G) Sexual intimacies with a patient, which includes any genital contact of the respiratory care practitioner or permit holder with the patient or the patient with the respiratory care practitioner or permit holder. This specifically prohibits sexual intercourse, sodomy, oral, anal copulation, or both; or any penetration of the anal or vaginal opening by any thing;

(H) Kissing the patient with the mouth, lips or tongue or the patient kissing the respiratory care practitioner or permit holder with the mouth, lips or tongue;

(I) Touching or caressing in an exploitative manner by either the respiratory care practitioner, permit holder or the patient, of the other person's breasts, genitals or buttocks;

(J) Engagement in any deliberate or repeated comments, gestures or physical conduct of

a sexual nature that exploits the professional relationship with the patient;

(K) Termination of therapeutic relationship with a patient for the purpose, expressed or implied, of having a sexual relationship with that person;

(L) Exposing one's self or encouraging another to expose themselves for the purpose of sexual gratification;

(M) Sexual harassment of patients or co-workers. Sexual harassment shall include but is not limited to—

1. Making unwelcome sexual advances;

2. Requesting sexual favors; and

3. Verbal or physical conduct of a sexual nature;

(N) Failure to follow policies or procedures implemented in the practice situation to safeguard patient care;

(O) Failure to exercise appropriate supervision over person(s) who are authorized to practice only under the supervision of a licensed professional;

(P) Exploitation of a supervisee in any way sexually or financially;

(Q) Delegation of professional responsibilities to a person not qualified, or not appropriately licensed or certified to provide those services, or both;

(R) Misrepresentation of credentials, training or level of education or the allowance of others to misrepresent credentials, training or level of education; and

(S) Use of a controlled substance or alcoholic beverage to an extent that impairs one's ability to provide safe respiratory care services.

*AUTHORITY: sections 334.800, 334.840.2, 334.850, 334.910 and 334.920, RSMo Supp. 1997.\* Emergency rule filed June 25, 1998, effective July 6, 1998, expired Feb. 25, 1999. Original rule filed June 25, 1998, effective Jan. 30, 1999.*

*\*Original authority: 334.800, RSMo 1996; 334.840, RSMo 1996; 334.860, RSMo 1996; 334.410, RSMo 1996; and 334.920, RSMo 1996.*