Advisory Board on Radiologic Technology

Virginia Board of Medicine

February 8, 2023 1:00 p.m.

Advisory Board on Radiologic Technology

Board of Medicine

Wednesday, February 8, 2023 @ 1:00 p.m.

9960 Mayland Drive, Suite 201

Henrico, VA

	Page
Call to Order - Rebecca Keith, RT, Chair	
Emergency Egress Procedures – William Harp, MD	i
Roll Call – Beulah Archer	
Approval of Minutes of September 21, 2022	1 - 4
Adoption of the Agenda	
Public Comment on Agenda Items (15 minutes)	
New Business	
Legislative Update of the 2023 General Assembly	5 – 8
2. Regulatory Update	
3. Guidance for Licensing Student Radiologic Technologists	
Announcements:	
Next Scheduled Meeting: June 14, 2023 @ 1:00 p.m.	

Adjournment

PERIMETER CENTER CONFERENCE CENTER EMERGENCY EVACUATION OF BOARD AND TRAINING ROOMS

(Script to be read at the beginning of each meeting.)

PLEASE LISTEN TO THE FOLLOWING INSTRUCTIONS ABOUT EXITING THESE PREMISES IN THE EVENT OF AN EMERGENCY.

Training Room 2

In the event of a fire or other emergency requiring the evacuation of the building, alarms will sound.

When the alarms sound, leave the room immediately. Follow any instructions given by Security staff

Exit the room using one of the doors at the back of the room. (Point) Upon exiting the doors, turn LEFT. Follow the corridor to the emergency exit at the end of the hall.

Upon exiting the building, proceed straight ahead through the parking lot to the fence at the end of the lot. Wait there for further instructions.

---DRAFT ---

ADVISORY BOARD ON RADIOLOGICAL TECHNOLOGY Minutes September 21, 2022

The Advisory Board on Radiological Technology met on Wednesday, September 21, 2022, at 1:00 p.m. at the Department of Health Professions, Perimeter Center, 9960 Mayland Drive, Richmond, Virginia.

MEMBERS PRESENT:

Joyce O. Hawkins, RT - Chair Rebecca Keith, RT, - Vice-Chair

Uma Prasad, MD

MEMBERS ABSENT:

David Roberts, RT

STAFF PRESENT:

William L. Harp, MD - Executive Director

Michael Sobowale, LLM - Deputy Director for Licensure Colanthia Opher - Deputy Director for Administration

Erin Barrett, JD - DHP Senior Policy Analyst Beulah Baptist Archer - Licensing Specialist

GUESTS PRESENT:

None

CALL TO ORDER

Joyce Hawkins called the meeting to order at 1:02 p.m.

EMERGENCY EGRESS PROCEDURES

Dr. Harp announced the emergency egress instructions.

ROLL CALL

Beulah Archer called the roll. A quorum was declared.

APPROVAL OF MINUTES

Dr. Prasad moved to adopt the minutes of the May 25, 2022 meeting. Rebecca Keith seconded the motion, The motion passed.

---DRAFT ---

ADOPTION OF AGENDA

Rebecca Keith moved to adopt the agenda. Dr. Prasad seconded the motion and passed unanimously.

PUBLIC COMMENT ON AGENDA ITEMS

None

New Business

1. Periodic Review of Regulations Governing the Practice of Radiologic Technologists

Erin Barrett discussed the mandatory four-year review of Chapter 18VAC 85-101 to determine whether this regulation should be repealed, amended or retained in its current form, without impacting public safety. The review of the regulations will be guided by the principles in Executive Order 14 as amended July 16, 2018. There were six public comments received during the public comment period all in favor of retaining the Chapter as written.

Erin Barrett presented her recommendations to amend or delete current provisions in 18VAC85-101-20, 18VAC85-101-145 (4), 18VAC85-101-162, and 18VAC85-101-163 (D). Some of these provisions are in the law, therefore it is unnecessary to repeat them in regulation

Rebecca Keith moved that the Advisory Board make a recommendation to the full Board to retain and amend Chapter 101 with the changes discussed. Dr. Prasad seconded. The motion passed.

2. Review of Bylaws for Advisory Board

Erin Barrett presented the uniform Bylaws for all Advisory Boards that the full Board approved at its June meeting. Since the Bylaws are slated to become effective on September 29, 2022, this was for information only.

3. Discuss Onset of Educational Practices to Fill Gaps in Available Radiologic Technologists

Joyce Hawkins expressed concern about limited-radiologic technology programs that may be started in hospitals to help with the short staffing or rad techs. She noted that radiologic technologists in hospitals do not have to be licensed, and according to the regulations, cannot teach limited programs without a license.

Dr. Harp suggested that a reminder be placed in Board Briefs regarding limited radiologic technology licensees practicing only in the authorized anatomical scope of practice printed on their licenses.

4. Approval of 2023 Calendar

Rebecca Keith moved to adopt the 2023 meeting calendar. Dr. Prasad seconded. The motion passed.

---DRAFT ---

5. Election of Officers

By acclamation, members approved the current officers to continue to serve: Joyce Hawkins as Chair and Uma Prasad as Vice-Chair.

ANNOUNCEMENTS

Licensing Statistics

Beulah Baptist Archer provided the license count for radiological technology as follows:

Limited Radiologic Technologist	Virginia	Current Active	483
	Virginia	Current Inactive	19
	Out of State	Current Active	23
	Out of State	Current Inactive	1
Total			526
Radiologic Technologist	Virginia	Current Active	3,559
	Virginia	Current Inactive	28
	Out of State	Current Active	1192
	Out of State	Current Inactive	15
Total			4,794
Radiologist Assistant	Virginia	Current Active	12
	Out of State	Current Active	4
Total			16

Next Scheduled Meeting

The next scheduled meeting is February 8, 2023 at 1:00 p.m.

ADJOURNMENT

With no other business to conduct, the meeting adjourned at 1:48 pm.

---DRAFT ----

William L. Harp, MD, Executive Director

Advisory Board Legislative Report As of February 1, 2023

HB 1573 Mental health conditions & impairment; health regulatory board w/in DHP to amend its applications.

Chief patron: Walker

A BILL to direct health regulatory boards within the Department of Health Professions to amend language related to mental health conditions and impairment in licensure, certification, and registration applications; emergency.

Summary as introduced:

Department of Health Professions; applications for licensure, certification, and registration; mental health conditions and impairment; emergency. Directs the Department of Health Professions to amend its licensure, certification, and registration applications to remove any existing questions pertaining to mental health conditions and impairment to and include the following questions: (i) Do you have any reason to believe that you would pose a risk to the safety or well-being of your patients or clients?; and (ii) Are you able to perform the essential functions of a practitioner in your area of practice with or without reasonable accommodation? The bill contains an emergency clause.

EMERGENCY

01/30/23 House: Engrossed by House as amended HB1573E

01/30/23 House: Printed as engrossed 23103067D-E

01/31/23 House: Read third time and passed House (98-Y 0-N)

01/31/23 House: Impact statement from DPB (HB1573E)

01/31/23 House: VOTE: Passage Emergency (98-Y 0-N)

HB 1622 Health regulatory boards; delegation of authority to conduct informal fact-finding proceedings.

Chief patron: Wright

Agency bill

A BILL to amend and reenact § 54.1-2400 of the Code of Virginia, relating to health regulatory boards; delegation of authority to conduct informal fact-finding proceedings.

Summary as introduced:

Health regulatory boards; delegation of authority to conduct informal fact-finding proceedings. Removes the requirement that a health regulatory board receive information that a practitioner may be subject to a disciplinary action in order for the board to delegate to an appropriately qualified agency subordinate the authority to conduct informal fact-finding proceedings.

01/27/23 House: Read second time and engrossed

01/30/23 House: Read third time and passed House (82-Y 17-N)

01/30/23 House: VOTE: Passage (82-Y 17-N)

01/31/23 Senate: Constitutional reading dispensed

01/31/23 Senate: Referred to Committee on Education and Health

HB 1638 DPOR, et al.; disclosure of certain information.

Chief patron: Walker

Agency bill

A BILL to amend and reenact § 54.1-108 of the Code of Virginia, relating to Department of Professional and Occupational Regulation, Department of Health Professions, and health regulatory boards; disclosure of information regarding examinations, licensure, certification, registration, or permitting.

Summary as introduced:

Department of Professional and Occupational Regulation, Department of Health Professions, and health regulatory boards; disclosure of information regarding examinations, licensure, certification, registration, or permitting. Allows the Department of Professional and Occupational Regulation, the Department of Health Professions, and health regulatory boards to mail or email upon request records regarding applications for admission to examinations or for licensure, certification, registration, or permitting and the related scoring records to the individual to whom such records pertain. Under current law, such records may be made available during normal working hours for copying by the subject individual.

01/27/23 House: Read second time and engrossed

01/30/23 House: Read third time and passed House BLOCK VOTE (100-Y 0-N)

01/30/23 House: VOTE: (100-Y 0-N)

01/31/23 Senate: Constitutional reading dispensed

01/31/23 Senate: Referred to Committee on Education and Health

SB 970 Mental health conditions and impairment; DHP to amend its licensure, etc., applications.

Chief patron: Mason

A BILL to direct the Department of Health Professions to amend language related to mental health conditions and impairment in licensure, certification, and registration applications; emergency.

Summary as introduced:

Department of Health Professions; applications for licensure, certification, and registration; mental health conditions and impairment; emergency. Directs the Department of Health Professions to amend its licensure, certification, and registration applications to remove any existing questions pertaining to mental health conditions and impairment to and include the following questions: (i) Do you have any reason to believe that you would pose a risk to the safety or well-being of your patients or clients?; and (ii) Are you able to perform the essential functions of a practitioner in your area of practice with or without reasonable accommodation? The bill contains an emergency clause.

EMERGENCY

01/17/23 Senate: Assigned Education sub: Health Professions

01/26/23 Senate: Reported from Education and Health (14-Y 0-N)

01/27/23 Senate: Constitutional reading dispensed (40-Y 0-N)

01/30/23 Senate: Read second time and engrossed

01/31/23 Senate: Read third time and passed Senate (39-Y 0-N)

SB 1054 Interjurisdictional compacts; criminal history record checks.

Chief patron: Peake

Agency bill

A BILL to amend the Code of Virginia by adding a section numbered 54.1-2409.1:1, relating to interjurisdictional compacts; criminal history record checks.

Summary as introduced:

Interjurisdictional compacts; criminal history record checks. Provides that when an

interjurisdictional compact requires criminal history record checks as a condition of participation, the applicable health regulatory board shall require each applicant to submit to fingerprinting and provide personal descriptive information to be forwarded along with his fingerprints through the Central Criminal Records Exchange to the Federal Bureau of Investigation for the purpose of obtaining criminal history record information.

01/08/23 Senate: Referred to Committee on the Judiciary

01/16/23 Senate: Rereferred from Judiciary (15-Y 0-N)

01/16/23 Senate: Rereferred to Education and Health

01/25/23 Senate: Assigned Education sub: Health Professions

01/26/23 Senate: Impact statement from DPB (SB1054)

SB 1060 DPOR, et al.; disclosure of certain information.

Chief patron: Favola

Agency bill

A BILL to amend and reenact § 54.1-108 of the Code of Virginia, relating to Department of Professional and Occupational Regulation, Department of Health Professions, and health regulatory boards; disclosure of information regarding examinations, licensure, certification, registration, or permitting.

Summary as introduced:

Department of Professional and Occupational Regulation, Department of Health Professions, and health regulatory boards; disclosure of information regarding examinations, licensure, certification, registration, or permitting. Allows the Department of Professional and Occupational Regulation, the Department of Health Professions, and health regulatory boards to mail or email upon request records regarding applications for admission to examinations or for licensure, certification, registration, or permitting and the related scoring records to the individual to whom such records pertain. Under current law, such records may be made available during normal working hours for copying by the subject individual.

01/18/23 Senate: Impact statement from DPB (SB1060)

01/18/23 Senate: Reported from General Laws and Technology (14-Y 0-N)

01/20/23 Senate: Constitutional reading dispensed (38-Y 0-N)

01/23/23 Senate: Read second time and engrossed

01/24/23 Senate: Read third time and passed Senate (39-Y 0-N)

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Commonwealth of Virginia



REGULATIONS

GOVERNING THE PRACTICE OF Radiologic Technology

VIRGINIA BOARD OF MEDICINE

Title of Regulations: 18 VAC 85-101-10 et seq.

Statutory Authority: § 54.1-2400 and Chapter 29 of Title 54.1 of the *Code of Virginia*

Revised Date: April 1, 2022

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Part I. General Provisions.

18VAC85-101-10. Definitions.

In addition to definitions in § 54.1-2900 of the Code of Virginia, the following words and terms when used in this chapter shall have the following meanings, unless the context clearly indicates otherwise:

"ACRRT" means the American Chiropractic Registry of Radiologic Technologists.

"ARRT" means the American Registry of Radiologic Technologists.

"Bone densitometry" means a process for measuring bone mineral density by utilization of single x-ray absorptiometry (SXA), dual x-ray absorptiometry (DXA) or other technology that is substantially equivalent as determined by the board.

"Direct supervision" means that a licensed radiologic technologist, doctor of medicine, osteopathy, chiropractic or podiatry is present and is fully responsible for the activities performed by radiologic personnel, with the exception of radiologist assistants.

"Direction" means the delegation of radiologic functions to be performed upon a patient from a licensed doctor of medicine, osteopathy, chiropractic, or podiatry, to a licensed radiologic technologist or a radiologic technologist-limited for a specific purpose and confined to a specific anatomical area, that will be performed under the direction of and in continuing communication with the delegating practitioner.

"ISCD" means the International Society for Clinical Densitometry.

"NMTCB" means Nuclear Medicine Technology Certification Board.

"Radiologist" means a doctor of medicine or osteopathic medicine specialized by training and practice in radiology.

"R.T.(R)" means a person who is currently certified by the ARRT as a radiologic technologist with certification in radiography.

"Traineeship" means a period of activity during which an applicant for licensure as a radiologic technologist works under the direct supervision of a practitioner approved by the board while waiting for the results of the licensure examination or an applicant for licensure as a radiologic technologist-limited working under direct supervision and observation to fulfill the practice requirements in 18VAC85-101-60.

18VAC85-101-20. Public Participation Guidelines.

A separate board regulation, <u>18VAC85-11</u>, entitled Public Participation Guidelines, provides for involvement of the public in the development of all regulations of the Virginia Board of Medicine.

18VAC85-101-25. Fees.

- A. Unless otherwise provided, fees listed in this section shall not be refundable.
- B. Initial licensure fees.
- 1. The application fee for radiologic technologist or radiologist assistant licensure shall be \$130.
- 2. The application fee for the radiologic technologist-limited licensure shall be \$90.
- 3. All examination fees shall be determined by and made payable as designated by the board.
- C. Licensure renewal and reinstatement for a radiologic technologist or a radiologist assistant.
 - 1. The fee for active license renewal for a radiologic technologist shall be \$135, and the fee for inactive license renewal shall be \$70. For 2021, the fees for renewal shall be \$108 for an active license as a radiologic technologist and \$54 for an inactive license. If a radiologist assistant holds a current license as a radiologic technologist, the renewal fee shall be \$50. If a radiologist assistant does not hold a current license as a radiologic technologist, the renewal fee shall be \$150. For renewal of a radiologist assistant license in 2021, the fee shall be \$40 for a radiologist assistant with a current license as a radiologic technologist and \$120 for a radiologist assistant without a current license as a radiologic technologist.
 - 2. An additional fee of \$50 to cover administrative costs for processing a late renewal application within one renewal cycle shall be imposed by the board.
 - 3. The fee for reinstatement of a radiologic technologist or a radiologist assistant license that has lapsed for a period of two years or more shall be \$180 and shall be submitted with an application for licensure reinstatement.
 - 4. The fee for reinstatement of a license pursuant to § 54.1-2408.2 of the Code of Virginia shall be \$2,000.
- D. Licensure renewal and reinstatement for a radiologic technologist-limited.
 - 1. The fee for active license renewal shall be \$70, and the fee for inactive license renewal shall be \$35. For 2021, the fees for renewal shall be \$54 for an active license as a radiologic technologist and \$28 for an inactive license.
 - 2. An additional fee of \$25 to cover administrative costs for processing a late renewal application within one renewal cycle shall be imposed by the board.
 - 3. The fee for reinstatement of a license that has lapsed for a period of two years or more shall be \$120 and shall be submitted with an application for licensure reinstatement.
 - 4. The fee for reinstatement of a license pursuant to § 54.1-2408.2 of the Code of Virginia shall be \$2,000.

- E. Other fees.
- 1. The application fee for a traineeship as a radiologic technologist or a radiologic technologist-limited shall be \$25.
- 2. The fee for a letter of good standing or verification to another state for licensure shall be \$10; the fee for certification of scores to another jurisdiction shall be \$25.
- 3. The handling fee for a returned check or a dishonored credit card or debit card shall be \$50.
- 4. The fee for a duplicate license shall be \$5.00, and the fee for a duplicate wall certificate shall be \$15.

18VAC85-101-26. Current name and address.

Each licensee shall furnish the board his current name and address of record. All notices required by law or by this chapter to be given by the board to any such licensee shall be validly given when sent to the latest address of record provided or served to the licensee. Any change of name or address of record or the public address, if different from the address of record, shall be furnished to the board within 30 days of such change.

Part II. Licensure Requirements - Radiologist Assistants.

18VAC85-101-27. Educational requirements for radiologist assistants.

An applicant for licensure as a radiologist assistant shall be a graduate of an educational program that is currently recognized by the ARRT for the purpose of allowing an applicant to sit for the ARRT certification examination leading to the Registered Radiologist Assistant credential.

18VAC85-101-28. Licensure requirements.

- A. An applicant for licensure as a radiologist assistant shall:
- 1. Meet the educational requirements specified in 18VAC85-101-27;
- 2. Submit the required application, fee, and credentials to the board;
- 3. Hold certification by the ARRT as an R.T.(R) or be licensed in Virginia as a radiologic technologist;
- 4. Submit evidence of passage of an examination for radiologist assistants resulting in national certification as an Registered Radiologist Assistant by the ARRT; and
- 5. Hold current certification in Advanced Cardiac Life Support (ACLS).
- B. If an applicant has been licensed or certified in another jurisdiction as a radiologist assistant or a radiologic technologist, the application shall include verification that there has been no disciplinary action taken or pending in that jurisdiction.

C. An applicant who fails the ARRT examination for radiologist assistants shall follow the policies and procedures of the ARRT for successive attempts.

Part III. Licensure Requirements - Radiologic Technologist.

18VAC85-101-30. Educational requirements for radiologic technologists.

An applicant for licensure as a radiologic technologist shall be a graduate of an educational program acceptable to the ARRT for the purpose of sitting for the ARRT certification examination.

18VAC85-101-40. Licensure requirements.

- A. An applicant for board licensure shall:
- 1. Meet the educational requirements specified in 18VAC85-101-30;
- 2. Submit the required application, fee, and credentials to the board; and
- 3. Submit evidence of passage of an examination resulting in certification by the ARRT or the NMTCB.
- B. If an applicant has been licensed or certified in another jurisdiction, he shall provide information on the status of each license or certificate held and verification from that jurisdiction of any current, unrestricted license.
- C. An applicant who fails the ARRT or NMTCB examination shall follow the policies and procedures of the certifying body for successive attempts.

18VAC85-101-50. (Repealed).

Part IV. Licensure Requirements - Radiologic Technologist-Limited.

18VAC85-101-55. Educational requirements for radiologic technologists-limited.

- A. An applicant for licensure as a radiologic technologist-limited shall be trained by one of the following:
- 1. Successful completion of educational coursework that is directed by a radiologic technologist with a bachelor's degree and current ARRT certification, has instructors who are licensed radiologic technologists or doctors of medicine or osteopathic medicine who are board-certified in radiology, and has a minimum of the following coursework:
- a. Image production/equipment operation —25 clock hours;
- b. Radiation protection —15 clock hours; and

- c. Radiographic procedures in the anatomical area of the radiologic technologist-limited's practice —10 clock hours taught by a radiologic technologist with current ARRT certification or a licensed doctor of medicine, osteopathy, podiatry or chiropractic;
- 2. An ACRRT-approved program;
- 3. The ISCD certification course for bone densitometry; or
- 4. Any other program acceptable to the board.
- B. A radiologic technologist-limited who has been trained through the ACRRT-approved program or the ISCD certification course and who also wishes to be authorized to perform x-rays in other anatomical areas shall meet the requirements of subdivision A 1 of this section.

18VAC85-101-60. Licensure requirements.

- A. An applicant for licensure by examination as a radiologic technologist-limited shall submit:
- 1. The required application and fee as prescribed by the board;
- 2. Evidence of successful completion of an examination as required in this section; and
- 3. Evidence of completion of training as required in 18VAC85-101-55.
- B. To qualify for limited licensure to practice under the direction of a doctor of medicine or osteopathic medicine with the exception of practice in bone densitometry, the applicant shall:
- 1. Provide evidence that he has received a passing score as determined by the board on the core section of the ARRT examination for Limited Scope of Practice in Radiography;
- 2. Meet one of the following requirements:
- a. Provide evidence that he has received a passing score as determined by the board on the section of the ARRT examination on specific radiographic procedures, depending on the anatomical areas in which the applicant intends to practice; or
- b. Until the ARRT offers an examination for limited licensure in the radiographic procedures of the abdomen and pelvis, the applicant may qualify for a limited license by submission of a notarized statement from a licensed radiologic technologist or doctor of medicine or osteopathy attesting to the applicant's training and competency to practice in that anatomical area as follows:
- (1) To perform radiographic procedures on the abdomen or pelvis, the applicant shall have successfully performed during the traineeship at least 25 radiologic examinations on patients of the abdomen or pelvis under the direct supervision and observation of a licensed radiologic technologist or a doctor of medicine or osteopathy. The notarized statement shall further attest to the applicant's competency in the areas of radiation safety, positioning, patient instruction, anatomy, pathology and technical factors.

- (2) When a section is added to the limited license examination by the ARRT that includes the abdomen and pelvis, the applicant shall provide evidence that he has received a passing score on that portion of the examination as determined by the board; and
- 3. Provide evidence of having successfully performed in a traineeship at least 10 radiologic examinations on patients in the anatomical area for which he is seeking licensure under the direct supervision and observation of a licensed radiologic technologist or a doctor of medicine or osteopathy. A notarized statement from the supervising practitioner shall attest to the applicant's competency in the areas of radiation safety, positioning, patient instruction, anatomy, pathology and technical factors.
- C. To qualify for limited licensure to practice in bone densitometry under the direction of a doctor of medicine, osteopathy, or chiropractic, the applicant shall either:
- 1. Provide evidence that he has received a passing score as determined by the board on the core section of the ARRT examination for Limited Scope of Practice in Radiography; and
- a. The applicant shall provide a notarized statement from a licensed radiologic technologist or doctor of medicine, osteopathy, or chiropractic attesting to the applicant's training and competency to practice in that anatomical area. The applicant shall have successfully performed at least 10 examinations on patients for bone density under the direct supervision and observation of a licensed radiologic technologist or a doctor of medicine or osteopathy; or
- b. When a section is added to the limited license examination by the ARRT that includes bone densitometry, the applicant shall provide evidence that he has received a passing score on that portion of the examination as determined by the board; or
- 2. Provide evidence that he has taken and passed an examination resulting in certification in bone densitometry from the ISCD or any other substantially equivalent credential acceptable to the board.
- D. To qualify for a limited license in the anatomical areas of the spine or extremities or in bone densitometry to practice under the direction of a doctor of chiropractic, the applicant shall provide evidence that he has met the appropriate requirements of subsection B, taken and passed the appropriate requirements of subsection C for bone densitometry only, or taken and passed an examination by the ACRRT.
- E. To qualify for a limited license in the anatomical area of the foot and ankle to practice under the direction of a doctor of podiatry, the applicant shall provide evidence that he has taken and passed an examination acceptable to the board.
- F. An applicant who fails the examination shall be allowed two more attempts to pass the examination after which he shall reapply and take additional educational hours which meet the criteria of 18VAC85-101-70.

18VAC85-101-61. (Repealed.)

18VAC85-101-70 to 18VAC85-101-90. (Repealed.)

Part V. Practice of Radiologist Assistants.

18VAC85-101-91. General requirements.

- A. A licensed radiologist assistant is authorized to:
- 1. Assess and evaluate the physiological and psychological responsiveness of patients undergoing radiologic procedures;
- 2. Perform patient assessment, and assist in patient management and patient education;
- 3. Evaluate image quality, make initial observations, and communicate observations to the supervising radiologist;
- 4. Administer contrast media or other medications prescribed by the supervising radiologist; and
- 5. Perform, or assist the supervising radiologist in performing, imaging procedures consistent with the guidelines adopted by the American College of Radiology, the American Society of Radiologic Technologists, and the American Registry of Radiologic Technologists.
- B. A licensed radiologist assistant is not authorized to:
- 1. Provide official interpretation of imaging studies; or
- 2. Dispense or prescribe medications.

18VAC85-101-92. Supervision of radiologist assistants.

A radiologist assistant shall practice under the direct supervision of a radiologist. Direct supervision shall mean that the radiologist is present in the facility and immediately available to assist and direct the performance of a procedure by a radiologist assistant. The supervising radiologist may determine that direct supervision requires his physical presence for the performance of certain procedures, based on factors such as the complexity or invasiveness of the procedure and the experience and expertise of the radiologist assistant.

Part VI. Practice of Radiologic Technologists.

18VAC85-101-100. General requirements.

- A. All services rendered by a radiologic technologist shall be performed only upon direction of a licensed doctor of medicine, osteopathy, chiropractic, or podiatry.
- B. Licensure as a radiologic technologist is not required for persons who are employed by a licensed hospital pursuant to §54.1-2956.8:1 of the Code of Virginia.

18VAC85-101-110. Individual responsibilities to patients and to licensed doctor of medicine, osteopathy, chiropractic, or podiatry.

- A. The radiologic technologist's responsibilities are to administer and document procedures consistent with his education and certifying examination and within the limit of his professional knowledge, judgment and skills.
- B. A radiologic technologist shall maintain continuing communication with the delegating practitioner.

18VAC85-101-120. Supervisory responsibilities.

- A. A radiologic technologist shall supervise no more than four radiologic technologists-limited or three trainees at any one time.
- B. A radiologic technologist shall be responsible for any action of persons performing radiologic functions under the radiologic technologist's supervision or direction.
- C. A radiologic technologist may not delegate radiologic procedures to any unlicensed personnel except those activities that are available without prescription in the public domain to include but not limited to preparing the patient for radiologic procedures and post radiologic procedures. Such nonlicensed personnel shall not perform those patient care functions that require professional judgment or discretion.

Part VII. Practice of Radiologic Technologist-Limited.

18VAC85-101-130. General requirements.

- A. A radiologic technologist-limited is permitted to perform radiologic functions within his capabilities and the anatomical limits of his training and examination. A radiologic technologist-limited is responsible for informing the board of the anatomical area or areas in which he is qualified by training and examination to practice.
- B. A radiologic technologist-limited shall not administer contrast media or radiopharmaceuticals or perform mammography, fluoroscopic procedures, computerized tomography, or vascular-interventional procedures. The radiologic technologist-limited is responsible to a licensed radiologic technologist, or doctor of medicine, osteopathy, chiropractic, or podiatry.

18VAC85-101-140. Individual responsibilities to patients and licensed radiologic technologist, doctor of medicine, osteopathy, chiropractic, or podiatry.

- A. The radiologic technologist-limited's procedure with the patient shall only be made after verbal or written communication, or both, with the licensed radiologic technologist, doctor of medicine, osteopathy, chiropractic, or podiatry.
- B. The radiologic technologist-limited's procedures shall be made under direct supervision.
- C. A radiologic technologist-limited, acting within the scope of his practice, may delegate nonradiologic procedures to an unlicensed person, including but not limited to preparing the patient for radiologic procedures and post radiologic procedures. Such nonlicensed personnel shall not perform those patient care functions that require professional judgment or discretion.

18VAC85-101-145. Registration for voluntary practice by out-of-state licensees.

Any radiologist assistant, radiologic technologist or radiologic technologist-limited who does not hold a license to practice in Virginia and who seeks registration to practice under subdivision 27 of §54.1-2901 of the Code of Virginia on a voluntary basis under the auspices of a publicly supported, all volunteer, nonprofit organization that sponsors the provision of health care to populations of underserved people shall:

- 1. File a complete application for registration on a form provided by the board at least five business days prior to engaging in such practice. An incomplete application will not be considered;
- 2. Provide a complete record of professional licensure in each state in which he has held a license and a copy of any current license;
- 3. Provide the name of the nonprofit organization, the dates and location of the voluntary provision of services;
- 4. Pay a registration fee of \$10; and
- 5. Provide a notarized statement from a representative of the nonprofit organization attesting to its compliance with provisions of subdivision 27 of §54.1-2901 of the Code of Virginia.

Part VIII. Renewal of Licensure.

18VAC85-101-150. Biennial renewal of license.

- A. A radiologist assistant, radiologic technologist or radiologic technologist-limited who intends to continue practice shall renew his license biennially during his birth month in each odd-numbered year and pay to the board the prescribed renewal fee.
- B. A license that has not been renewed by the first day of the month following the month in which renewal is required shall be expired.
- C. An additional fee as prescribed in 18VAC85-101-25 shall be imposed by the board.
- D. In order to renew an active license as a radiologic technologist, a licensee shall attest to having completed 24 hours of continuing education as acceptable to the ARRT within the last biennium.
- E. In order to renew an active license as a radiologic technologist-limited, a licensee shall attest to having completed 12 hours of continuing education within the last biennium that corresponds to the anatomical areas in which the limited licensee practices. Hours shall be acceptable to the ARRT, or by the ACRRT for limited licensees whose scope of practice is chiropractic, or by any other entity approved by the board for limited licensees whose scope of practice is podiatry or bone densitometry.
- F. In order to renew an active license as a radiologist assistant, a licensee shall attest to having completed 50 hours of continuing education as acceptable to the ARRT within the last biennium. A minimum of 25 hours of continuing education shall be recognized by the ARRT as intended for

radiologist assistants or radiologists and shall be specific to the radiologist assistant's area of practice. Continuing education hours earned for renewal of a radiologist assistant license shall satisfy the requirements for renewal of a radiologic technologist license.

- G. Up to two continuing education hours may be satisfied through delivery of radiological services, without compensation, to low-income individuals receiving services through a local health department or a free clinic organized in whole or primarily for the delivery of health services. One hour of continuing education may be credited for three hours of providing such volunteer services. For the purpose of continuing education credit for voluntary service, documentation by the health department or free clinic shall be acceptable.
- H. Other provisions for continuing education shall be as follows:
- 1. A practitioner shall be exempt from the continuing education requirements for the first biennial renewal following the date of initial licensure in Virginia.
- 2. The practitioner shall retain in his records the Continued Competency Activity and Assessment Form available on the board's website with all supporting documentation for a period of four years following the renewal of an active license.
- 3. The board shall periodically conduct a random audit of its active licensees to determine compliance. The practitioners selected for the audit shall provide all supporting documentation within 30 days of receiving notification of the audit.
- 4. Failure to comply with these requirements may subject the licensee to disciplinary action by the board.
- 5. The board may grant an extension of the deadline for satisfying continuing competency requirements, for up to one year, for good cause shown upon a written request from the licensee prior to the renewal date.
- 6. The board may grant an exemption for all or part of the requirements for circumstances beyond the control of the licensee, such as temporary disability, mandatory military service, or officially declared disasters.

18VAC85-101-151. Reinstatement.

- A. A licensee who allows his license to lapse for a period of two years or more and chooses to resume his practice shall submit to the board a new application, information on practice and licensure in other jurisdictions during the period in which the license was lapsed, evidence of completion of hours of continuing education equal to those required for a biennial renewal and the fees for reinstatement of his license as prescribed in 18VAC85-101-25.
- B. A licensee whose license has been revoked by the board and who wishes to be reinstated shall submit a new application to the board, fulfill additional requirements as specified in the order from the board, and pay the fee for reinstatement of his license as prescribed in 18VAC85-101-25.

18VAC85-101-152. Inactive license.

- A. A licensed radiologist assistant, radiologic technologist or radiologic technologist-limited who holds a current, unrestricted license in Virginia may, upon a request on the renewal application and submission of the required fee, be issued an inactive license. The holder of an inactive license shall not be required to maintain continuing education hours and shall not be entitled to perform any act requiring a license to practice radiography in Virginia.
- B. To reactivate an inactive license, a licensee shall:
- 1. Submit the required application;
- 2. Pay a fee equal to the difference between the current renewal fee for inactive licensure and the renewal fee for active licensure; and
- 3. Verify that he has completed continuing education hours equal to those required for the period in which he held an inactive license in Virginia, not to exceed one biennium.
- C. The board reserves the right to deny a request for reactivation to any licensee who has been determined to have committed an act in violation of §54.1-2915 of the Code of Virginia or any provisions of this chapter.

18VAC85-101-153. Restricted volunteer license.

- A. A licensed radiologist assistant, radiologic technologist or a radiologic technologist-limited who held an unrestricted license issued by the Virginia Board of Medicine or by a board in another state as a licensee in good standing at the time the license expired or became inactive may be issued a restricted volunteer license to practice without compensation in a clinic that is organized in whole or in part for the delivery of health care services without charge in accordance with §54.1-106 of the Code of Virginia.
- B. To be issued a restricted volunteer license, a licensee shall submit an application to the board that documents compliance with requirements of §54.1-2928.1 of the Code of Virginia and the application fee prescribed in 18VAC85-101-25.
- C. The licensee who intends to continue practicing with a restricted volunteer license shall renew biennially during his birth month, meet the continued competency requirements prescribed in subsection D of this section, and pay to the board the renewal fee prescribed in 18VAC85-101-25.
- D. The holder of a restricted volunteer license shall not be required to attest to hours of continuing education for the first renewal of such a license. For each renewal thereafter, a licensed radiologic technologist shall attest to having completed 12 hours of Category A continuing education as acceptable to and documented by the ARRT within the last biennium. A radiologic technologist-limited shall attest to having completed six hours of Category A continuing education within the last biennium that corresponds to the anatomical areas in which the limited licensee practices. Hours shall be acceptable to and documented by the ARRT or by any other entity approved by the board for limited licensees whose scope of practice is podiatry or bone densitometry.

18VAC85-101-160. [Repealed]

Part IX. Standards of Professional Conduct.

18VAC85-101-161. Confidentiality.

A practitioner shall not willfully or negligently breach the confidentiality between a practitioner and a patient. A breach of confidentiality that is required or permitted by applicable law or beyond the control of the practitioner shall not be considered negligent or willful.

18VAC85-101-162. Patient records.

- A. Practitioners shall comply with provisions of § 32.1-127.1:03 related to the confidentiality and disclosure of patient records.
- B. Practitioners shall properly manage patient records and shall maintain timely, accurate, legible and complete records.
- C. Practitioners shall maintain a patient record in accordance with policies and procedures of the employing institution or entity.

18VAC85-101-163. Practitioner-patient communication.

- A. Except as provided in § 32.1-127.1:03 F of the Code of Virginia, a practitioner shall accurately present information to a patient or his legally authorized representative in understandable terms and encourage participation in decisions regarding the patient's care.
- B. A practitioner shall not deliberately make a false or misleading statement regarding the practitioner's skill or the efficacy or value of a medication, treatment, or procedure prescribed or directed by the practitioner in the treatment of any disease or condition.
- C. A practitioner shall refer to or consult with other health care professionals, if so indicated.
- D. Practitioners shall adhere to requirements of § 32.1-162.18 of the Code of Virginia for obtaining informed consent from patients prior to involving them as subjects in human research with the exception of retrospective chart reviews.

18VAC85-101-164. Practitioner responsibility.

A practitioner shall not:

- 1. Perform procedures or techniques or provide interpretations that are outside the scope of his practice or for which he is not trained and individually competent;
- 2. Knowingly allow subordinates to jeopardize patient safety or provide patient care outside of the subordinate's scope of practice or their area of responsibility. Practitioners shall delegate patient care only to subordinates who are properly trained and supervised;

- 3. Engage in an egregious pattern of disruptive behavior or interaction in a health care setting that interferes with patient care or could reasonably be expected to adversely impact the quality of care rendered to a patient; or
- 4. Exploit the practitioner/patient relationship for personal gain.
- B. Advocating for patient safety or improvement in patient care within a health care entity shall not constitute disruptive behavior provided the practitioner does not engage in behavior prohibited in A 3 of this section.

18VAC85-101-165. Sexual contact.

- A. For purposes of § 54.1-2915 A 12 and A 19 of the Code of Virginia and this section, sexual contact includes, but is not limited to, sexual behavior or verbal or physical behavior which:
- 1. May reasonably be interpreted as intended for the sexual arousal or gratification of the practitioner, the patient, or both; or
- 2. May reasonably be interpreted as romantic involvement with a patient regardless of whether such involvement occurs in the professional setting or outside of it.
- B. Sexual contact with a patient.
- 1. The determination of when a person is a patient for purposes of § 54.1-2915 A 19 of the Code of Virginia is made on a case-by-case basis with consideration given to the nature, extent, and context of the professional relationship between the practitioner and the person. The fact that a person is not actively receiving treatment or professional services from a practitioner is not determinative of this issue. A person is presumed to remain a patient until the patient-practitioner relationship is terminated.
- 2. The consent to, initiation of, or participation in sexual behavior or involvement with a practitioner by a patient does not change the nature of the conduct nor negate the statutory prohibition.
- C. Sexual contact between a practitioner and a former patient.

Sexual contact between a practitioner and a former patient after termination of the practitionerpatient relationship may still constitute unprofessional conduct if the sexual contact is a result of the exploitation of trust, knowledge, or influence of emotions derived from the professional relationship.

- D. Sexual contact between a practitioner and a key third party shall constitute unprofessional conduct if the sexual contact is a result of the exploitation of trust, knowledge or influence derived from the professional relationship or if the contact has had or is likely to have an adverse effect on patient care. For purposes of this section, key third party of a patient shall mean: spouse or partner, parent or child, guardian, or legal representative of the patient.
- E. Sexual contact between a practitioner and a supervisor and a trainee shall constitute unprofessional conduct if the sexual contact is a result of the exploitation of trust, knowledge or

influence derived from the professional relationship or if the contact has had or is likely to have an adverse effect on patient care.

18VAC85-101-166. Refusal to provide information.

A practitioner shall not willfully refuse to provide information or records as requested or required by the board or its representative pursuant to an investigation or to the enforcement of a statute or regulation.