

Advisory Board on Radiologic Technology

Virginia Board of Medicine

September 21, 2022

1:00 p.m.

Advisory Board on Radiologic Technology

Board of Medicine

Wednesday, September 21, 2022 @ 1:00 p.m.

9960 Mayland Drive, Suite 201

Henrico, VA

	Page
Call to Order – Joyce Hawkins, RT, Chair	
Emergency Egress Procedures – William Harp, MD	i
Roll Call – Beulah Archer	
Approval of Minutes of May 25, 2022	1 - 4
Adoption of the Agenda	
Public Comment on Agenda Items (15 minutes)	
New Business	
1. Periodic Review of Regulations Governing the Practice of Radiologic Technology Erin Barrett	5 – 24
2. Review of Bylaws for Advisory Board Erin Barrett	25 - 26
3. Discuss Onset of Educational Practices to fill Gaps in Available Radiologic Technologists Joyce Hawkins	-- --
4. Approval of 2023 Meeting Calendar Joyce Hawkins, RT	27
5. Election of Officers Joyce Hawkins, RT	

Announcements:

Next Scheduled Meeting: February 8, 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.

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

Training Room 1

Exit the room using one of the doors at the back of the room. (**Point**) Upon exiting the room, 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 RADIOLOGIC TECHNOLOGY
Virginia Board of Medicine
May 25, 2022

The Advisory Board on Radiologic Technology met on Wednesday, May 25, 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
Uma Prasad, MD
David Roberts, RT

MEMBERS ABSENT: Rebecca Keith, RT, Vice-Chair

STAFF PRESENT: William L. Harp, MD, Executive Director
Michael Sobowale, LLM, Deputy for Licensing
Colanthia Opher, Deputy 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 1:00 p.m.

EMERGENCY EGRESS PROCEDURES

Ms. Hawkins provided the emergency egress procedures.

ROLL CALL

Beulah Archer called the roll. A quorum was established.

APPROVAL OF MINUTES FROM FEBRUARY 2, 2022

Dr. Prasad moved to approve the minutes. David Roberts seconded. The minutes were approved as presented.

ADOPTION OF AGENDA

---DRAFT---

Joyce Hawkins requested the correction of “AART” to “ARRT”.

David Roberts moved to approve the amended agenda. Dr. Prasad seconded. The agenda was adopted with the amendment.

PUBLIC COMMENT

There was no public comment.

2021 WORKFORCE DATA PRESENTATION

Dr. Shobo provided data for current employment trends across various demographics, i.e., age, gender, education debt, income, and retirement plans.

NEW BUSINESS

1. Legislative Updates from the 2022 General Assembly

Ms. Barrett discussed SB317 which allows a rad tech from another state to practice for 90 days contingent upon an employer’s letter to the Board of Medicine attesting to the individual’s good standing in the other state and nonrevealing NPDB report. If the individual has applied for a permanent license, an additional 60 days can be granted.

2. Review the Use of “Form L” in the License Application Process

Ms. Hawkins addressed the Advisory regarding the removal of Form L from the current application process. After review of the regulations that govern the practice of radiologic technology, the members voted to eliminate Form L, as the ARRT requires successful completion of at least an Associate’s degree for certification.

Dr. Prasad moved to remove Form L. David Roberts seconded. The motion carried.

3. Discussion of the Licensing Process for Radiologic Technology

David Roberts and Ms. Hawkins reiterated how SB317 will resolve major staffing issues for Virginia hospitals by hiring contract workers.

4. Additional Information on ARRT Certification/Data

The Advisory discussed current ARRT certification for renewal. Ms. Hawkins asked for statistics to clarify the numbers of Rad Techs who attest to ARRT certification at renewal. Dr. Harp advised that the Board could get the numbers during the 2023 renewal period if the questions about ARRT and CE were bifurcated.

---DRAFT---

5. Updating of the Bylaws for the Advisory Board

Erin Barrett suggested that the Advisory’s bylaws be covered by a single, general guidance document for all advisory boards, approved by the Board of Medicine. Dr. Prasad made the motion, and David Roberts seconded. The motion carried.

ANNOUNCEMENTS

Beulah Baptist Archer provided the license count for radiologic technology.

Limited Radiologic Technologist	Virginia	Current Active	468
	Virginia	Current Inactive	19
	Out of State	Current Active	23
	Out of State	Current Inactive	1
Total			511
Radiologic Technologist	Virginia	Current Active	3415
	Virginia	Current Inactive	30
	Out of State	Current Active	1,045
	Out of State	Current Inactive	15
Total			4,505
Radiologist Assistant	Virginia	Current Active	12
	Out of State	Current Active	4
Total			16

Colanthia Morton Opher advised the Board to submit all travel vouchers within 30 days.

Next Scheduled Meeting: September 21, 2022 @ 1:00 p.m.

Adjournment

Ms. Hawkins adjourned the meeting 2:10 p.m.

Joyce O. Hawkins, RT Chair
Director

William L. Harp, MD, Executive

--DRAFT --

Beulah Baptist Archer, Recording Secretary

Agenda Items: Recommend periodic review result and potential regulatory changes to full Board

Included in your agenda package are:

- Notice of periodic review
- Public comment received
- Recommended revisions to Chapter 101

Action needed:

- Consider any additional changes needed
- Motion to recommend full Board retain and amend Chapter 101 with suggested amendments



Agency Department of Health Professions
Board Board of Medicine
Chapter Regulations Governing the Licensure of Radiologic Technology
[18 VAC 85 - 101]

[Edit Review](#)

Review 2151

Periodic Review of this Chapter
 Includes a Small Business Impact Review

Date Filed: 6/16/2022

Review Announcement

Pursuant to Executive Order 14 (as amended July 16, 2018) and §§ 2.2-4007.1 and 2.2-4017 of the Code of Virginia, this regulation is undergoing a periodic review.

The review of this regulation will be guided by the principles in Executive Order 14 (as amended July 16, 2018). <http://TownHall.Virginia.Gov/EO-14.pdf>.

The purpose of this review is to determine whether this regulation should be repealed, amended, or retained in its current form. Public comment is sought on the review of any issue relating to this regulation, including whether the regulation (i) is necessary for the protection of public health, safety, and welfare or for the economical performance of important governmental functions; (ii) minimizes the economic impact on small businesses in a manner consistent with the stated objectives of applicable law; and (iii) is clearly written and easily understandable.

In order for you to receive a response to your comment, your contact information (preferably an email address or, alternatively, a U.S. mailing address) must accompany your comment. Following the close of the public comment period, a report of both reviews will be posted on the Town Hall and a report of the small business impact review will be published in the Virginia Register of Regulations.

Contact Information	
Name / Title:	William L. Harp, M.D. / <i>Executive Director</i>
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Publication Information and Public Comment Period

Published in the Virginia Register on 7/18/2022 [Volume: 38 Issue: 24]

Comment Period begins on the publication date and ends on 8/17/2022

Comments Received: 6

Review Result

Pending

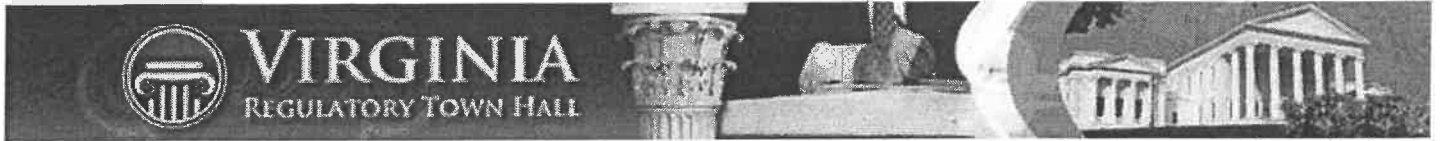
8/31/22, 8:16 AM

Virginia Regulatory Town Hall View Periodic Review

Attorney General Certification

Pending

This periodic review was created by Erin Barrett on 06/16/2022 at 12:26pm



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Agency Department of Health Professions

Board Board of Medicine

Chapter Regulations Governing the Licensure of Radiologic Technology [18 VAC 85 - 101]

6 comments

All good comments for this forum [Show Only Flagged](#)

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Commenter: Ferell Justice

7/8/22 2:40 pm

Chapter 101 - Radiologic Technology

I am in full support of the continuation of regulations in Virginia related to Chapter 101-Radiologic Technology. I support the retention of this regulation, at this time, as written.

CommentID: 122220

Commenter: Millard Ferell Justice

7/18/22 9:32 am

Chapter 101 - Radiologic Technology

I am in full support of the continuation of regulations in Virginia related to Chapter 101 - Radiologic Technology. I support the retention of this regulation, at this time, as written.

CommentID: 122696

Commenter: Ruth Kusterer / Virginia Society of Radiologic Technologists

7/18/22 12:39 pm

Radiologic Technology, Chapter 101

I am in support of the regulations for Radiologic Technologist remaining intact, as written relating to Chapter 101-Radiologic Technology. I fully support no revisions of this chapter at this time.

CommentID: 122720

Commenter: Nicholas Gimmi, Virginia Society of Radiologic Technologists, Board Chair

7/25/22 1:21 pm

Chapter 101-Radiologic Technology

I am in support of keeping the current regulations as written in Chapter 101-Radiologic Technology. Discontinuing this would water down regulations, placing patients at risk of receiving care from a person or caregiver that has limited or no education in this field. This could certainly lead to undiagnostic imaging and possible misdiagnosis, as well as risk of overexposure.

CommentID: 122952

Commenter: Travis Prowant, American Registry of Radiologic Technologists

8/7/22 3:18 pm

Chapter 101- Radiologic Technology

I am in full support of the continuation of regulations in Virginia related to Chapter 101- Radiologic Technology. I support retention of this regulation, at this time, as written.

As an American Registry of Radiologic Technologist Board Trustee, I find this even more important to keep in place as we routinely find encroachment issues in almost every state. And, more importantly, people want to use medical imaging and dispense ionizing radiation to the public with very little or NO training or experience in proper use of the equipment. I have genuine concerns over the safety and health of the citizens of the Commonwealth should this regulation be removed.

CommentID: 127143

Commenter: Jacqueline Stuart / Virginia Society of Radiologic Technologists

8/13/22 1:27 pm

Chapter 101- Radiologic Technology

I am in full support of the continuation of regulations in Virginia related to Chapter 101- Radiologic Technology. I support retention of this regulation, at this time, as written.

As a student of the radiologic imaging sciences at Tidewater Community College and an active student member of the VSRT I am very aware of the issue of professional encroachment. More importantly, I am concerned ultimately about public health and safety if this regulation is removed. In accredited educational programs for these sciences we learn radiation physics and safety practices at length, as well as how to obtain and recognize diagnostic quality images. The practice of imaging without properly regulated training and maintained certification introduces too many variables into patient care related to medical imaging.

CommentID: 127211

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, 18VAC85-11, 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.

Commented [VP1]: Does this ever happen?

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.

Commented [VP2]: Go back to some of the other professions and do this instead of the C&P of chapter 20 most of them have

- 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 practitioner-patient 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.

Chapter 29 of Title 54.1 of the Code of Virginia
Medicine

§ 54.1-2956.8. Advisory Board on Radiological Technology; appointments; terms; etc.

The Advisory Board on Radiological Technology shall assist the Board in carrying out the provisions of this chapter regarding the qualifications, examination, registration and regulation of certified radiological technology practitioners.

The Advisory Board shall consist of five members to be appointed by the Governor as follows: three members shall be licensed radiological technology practitioners who have been practicing in the Commonwealth for not less than three years prior to their appointments, one member shall be a board-certified radiologist licensed in the Commonwealth, and one member shall be a citizen member appointed from the Commonwealth at large. Beginning July 1, 2011, the Governor's appointments shall be staggered as follows: two members for a term of one year, one member for a term of two years, and two members for a term of three years. Thereafter, appointments shall be for four-year terms.

Vacancies occurring other than by expiration of term shall be filled for the unexpired term. No person shall be eligible to serve on the Advisory Board for more than two consecutive terms.

(1990, c. 966; 2002, c. 698; 2011, cc. 691, 714.)

§ 54.1-2956.8:1. Unlawful to practice radiologic technology without license; unlawful designation as a radiologist assistant, radiologic technologist, or radiologic technologist, limited; Board to regulate radiologist assistants and radiologic technologists.

Except as set forth herein, it shall be unlawful for a person to practice or hold himself out as practicing as a radiologist assistant, radiologic technologist, or radiologic technologist, limited, unless he holds a license as such issued by the Board.

In addition, it shall be unlawful for any person who is not licensed under this chapter whose licensure has been suspended or revoked, or whose licensure has lapsed and has not been renewed to use in conjunction with his name the words "licensed radiologist assistant," "licensed radiologic technologist" or "licensed radiologic technologist, limited" or to otherwise by letters, words, representations, or insignias assert or imply that he is licensed to practice radiologic technology.

The Board shall prescribe by regulation the qualifications governing the licensure of radiologist assistants, radiologic technologists, and radiologic technologists, limited. The regulations may include requirements for approved education programs, experience, examinations, and periodic review for continued competency.

The provisions of this section shall not apply to any employee of a hospital licensed pursuant to Article 1 (§ 32.1-123 et seq.) of Chapter 5 of Title 32.1 acting within the scope of his employment or engagement as a radiologic technologist.

(1994, c. 803; 2009, cc. 83, 507.)

§ 54.1-2956.8:2. Requisite training and educational achievements of radiologist assistants, radiologic technologists, and radiologic technologists, limited.

The Board shall establish a testing program to determine the training and educational achievements of radiologist assistants, radiologic technologists, or radiologic technologists, limited. The Board may accept other evidence such as successful completion of a national certification examination, experience, or completion of an approved training program in lieu of testing and shall establish this as a prerequisite for approval of the licensee's application. The Board shall consider and may accept relevant practical experience and didactic and clinical components of education and training completed by an applicant for licensure as a radiologist assistant, radiologic technologist, or radiologic technologist, limited, during his service as a member of any branch of the armed forces of the United States as evidence of the satisfaction of the educational requirements for licensure.

(1994, c. 803; 2009, cc. 83, 507; 2011, c. 390.)

Agenda Item: Bylaws for all Advisory Boards

Included in your agenda package are:

- ❖ Copy of Approved Guidance Document 85-3

Action Needed:

- None

**BYLAWS FOR
ADVISORY BOARDS OF THE BOARD OF MEDICINE**

Article I - Members of the Advisory Board

The appointments and limitations of service of the members shall be in accordance with the applicable statutory provision of the advisory board governing such matters.

Article II - Officers

Section 1. Titles of Officers - The officers of the advisory board shall consist of a chairman and vice-chairman elected by the advisory board. The Executive Director of the Board of Medicine shall serve in an advisory capacity.

Section 2. Terms of Office - The chairman and vice-chairman shall serve for a one-year term and may not serve for more than two consecutive terms in each office. The election of officers shall take place at the first meeting after July 1, and officers shall assume their duties immediately thereafter.

Section 3. Duties of Officers.

- (a) The chairman shall preside at all meetings when present, make such suggestions as may deem calculated to promote and facilitate its work, and discharge all other duties pertaining by law or by resolution of the advisory board. The chairman shall preserve order and conduct all proceedings according to and by parliamentary rules and demand conformity thereto on the part of the members. The chairman shall appoint all committees as needed.

The chairman shall act as liaison between the advisory board and the Board of Medicine on matters pertaining to licensing, discipline, legislation and regulation of the profession which the advisory board represents.

When a committee is appointed for any purpose, the chairman shall notify each member of the appointment and furnish any essential documents or information necessary.

- (b) The vice-chairman shall preside at meetings in the absence of the chairman and shall take over the other duties of the chairman as may be made necessary by the absence of the chairman.

Article III - Meetings

Section 1. There shall be at least one meeting each year in order to elect the chairman and vice-chairman and to conduct such business as may be deemed necessary by the advisory board.

Section 2. Quorum - Three members shall constitute a quorum for transacting business.

Section 3. Order of Business - The order of business shall be as follows:

- (a) Calling roll and recording names of members present
- (b) Approval of minutes of preceding regular and special meetings
- (c) Adoption of Agenda
- (d) Public Comment Period
- (e) Report of Officers
- (f) Old Business
- (g) New Business

The order of business may be changed at any meeting by a majority vote.

Article IV - Amendments

Amendments to these bylaws may be proposed by presenting the amendments in writing to all advisory board members prior to any scheduled advisory board meeting. If the proposed amendment receives a majority vote of the members present at that advisory board meeting, it shall be represented as a recommendation for consideration to the Board of Medicine at its next regular meeting.

2023 Board Meeting Dates

Advisory Board on:

Behavioral Analysts			10:00 a.m.
Mon - February 6	June 12	October 2	
Genetic Counseling			1:00 p.m.
Mon - February 6	June 12	October 2	
Occupational Therapy			10:00 a.m.
Tue - February 7	June 13	October 3	
Respiratory Care			1:00 p.m.
Tue - February 7	June 13	October 3	
Acupuncture			10:00 a.m.
Wed - February 8	June 14	October 4	
Radiological Technology			1:00 p.m.
Wed - February 8	June 14	October 4	
Athletic Training			10:00 a.m.
Thurs - February 9	June 15	October 5	
Physician Assistants			1:00 p.m.
Thurs - February 9	June 15	October 5	
Midwifery			10:00 a.m.
Fri - February 10	June 16	October 6	
Polysomnographic Technology			1:00 p.m.
Fri - February 10	June 16	October 7	
Surgical Assisting			10:00 a.m.
Mon - February 13	June 19	October 10	