BUREAU OF RADIATION CONTROL

GENERAL GUIDELINES AND REQUIREMENTS FOR PROVIDERS OF RADIOLOGIC TECHNOLOGY CONTINUING EDUCATION AND HIV/AIDS EDUCATION

November 2009
## GENERAL GUIDELINES AND REQUIREMENTS
### FOR CONTINUING EDUCATION & HIV/AIDS EDUCATION

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I. GENERAL INFORMATION

This document contains guidelines and requirements for those who provide continuing education to Florida’s technology professionals.

II. LEGAL AUTHORITY

Chapter 468, Part IV, Florida Statutes, (FS) and Chapter 64E-3, Florida Administrative Code, (FAC) provides that persons possessing certification in Radiologic Technology must earn twelve (12) hours of continuing-education credits by the expiration date on their certificate (completed during their biennium) to renew. See 64E-3.008 – 64E-3.010, FAC, in particular.

III. GOAL

The goal of continuing education is to enhance the technical skills and expertise of individuals by suggesting information and methods that will reduce unnecessary and unproductive ionizing radiation exposures.

IV. SUBJECT MATTER

The content of each course shall be planned in a logical order and reflect input from qualified persons in the subject matter. Appropriate subject matter for continuing education courses shall reflect the professional education needs for the learner to meet the healthcare need of the consumer. Learning experiences and teaching methods must be appropriate to achieve the objectives. The time allotted for each activity must be sufficient for the learner to meet the objectives.

The subject matter presented in a continuing education course must fall in one of two categories: technical or personal development.

Under the technical category, the program may cover any technical aspect of radiologic technology: radiography, nuclear medicine, or radiation therapy. Course topics may include but are not limited to the following:

Digital Radiography,
Operation of Diagnostic and Therapy Equipment,
Radiographic Positioning,
Film Processing,
Shielding and Collimation,
Computed Tomography,
Linear Accelerators,
Radiographic Screens,
Photo Timing,
Portable Radiography,
Contrast Media Studies,
Implant Therapy,
Ultrasound,
Magnetic Resonance Imaging,
Angiography,
Mammography,
Cardiac Catheterization,
Biological or Physical Sciences, (radiation physics/biology, etc.) and
Management or Administration of Radiologic Healthcare Personnel, (such as radiation protection and safety and dosimetry).

Under the personal development category, the program may cover any topics that enhances the technologist’s skills and improves patient care. However, awards presentations, introductions of new staff members, tributes to departing staff, employee satisfaction surveys, discussions of facility fiscal status or human resource policies, or similar topics will not be approved for personal development. A maximum of three hours of continuing education in this category may be used during each renewal cycle. A list of suggested course topics is:

Patient care,
Nursing,
Stress Management,
Legal Issues,
Time Management,
CPR,
HIV/AIDS education (does not include 4-hr required course)
Psychology,
Medical Economics, and
Communication.

V. CONTINUING EDUCATION STANDARDS

1. EXCESSIVE HOURS

Technologists who complete more than twelve hours of continuing education during their renewal cycle may not carry hours over to the next renewal cycle. Only continuing education earned in your current biennium will show online under the CE tab of the license verification system (https://ww2.doh.state.fl.us/IRM00PRAES/PRASLIST.ASP).

2. COURSE CREDIT

A technologist cannot repeat the same course during a biennial renewal cycle.

3. LENGTH OF COURSE
All courses must be at least 50 minutes in length to receive one contact hour of credit. No course less than 50 minutes in length will be approved. Courses which extend beyond one contact hour will be given one half hour of additional contact credit for each additional 25 minutes increment in length.

4. TYPES OF COURSES

Live Presentation

The Bureau of Radiation Control must approve all live presentations. Form DH 374, “CE Provider Information Sheet” must be completed and a course outline and description of course objectives must be submitted. The presentation date on the roster for a live course should reflect the last date of credit awarded. For example: if the course was presented January 5 through January 9 the presentation date would be January 9.

Satellite programs

On occasion, companies provide satellite presentations to all the hospitals that use their equipment, supplies, or services. The sponsor of the program should submit the course for approval. A facilitator will need to be assigned to each facility to monitor attendance and assure completion of the program for certificate holders to receive credit.

Self-study programs

The Bureau of Radiation Control must approve all self-study programs. Form DH 374 must be completed and a copy of the entire program materials must be submitted. All the submitted educational material will be retained in our files and will not be returned.

Textbook/Electronic media

All textbook/videotaped/DVD/CDs courses must be submitted for approval, including electronic media made of live presentations. If the submitted textbook/electronic media is not developed or copyrighted by the provider, a letter from the developer or copyright holder giving permission to use the textbook/electronic media must be submitted.

5. POST TEST REQUIREMENTS (FOR SELF-STUDY COURSES)

All self-study (includes textbook/electronic media) courses must include a post-test to assess the participant’s understanding of the course material and attainment of course objectives. The course provider must grade the post-test and a participant must receive a score of at least 75 percent on the post-test to successfully complete a course. A minimum of 20 post-test questions is required for a course awarded one contact hour of continuing
education credit. An additional five post-test questions are required for each additional half contact hour of continuing education credit.

VI. COURSE REVIEW/APPROVAL PROCESS

The education provider must complete and submit Form DH 374 (see attached sample) and the required information, plus the instructor's curriculum vitae (CV) or resume, for each separate course 30 days before the presentation date. A course can be submitted with multiple instructors. Once on file, the instructor's CV/resume does not need to be resubmitted.

Form DH 374 will be returned to the provider indicating the results of the evaluation of the course. If the course is denied, the justification for withholding approval will be documented on the form and the provider will be notified in writing.

A course is approved for approximately three years. If the course content is amended at any time during the three year approval period, then the course must be resubmitted for review as a new course. If the only change in the course is a change of instructor, the instructor's CV/resume, the approved Form DH 374, and a new Form DH 374 with the new instructor listed need to be submitted for re-evaluation. The original course approval will be amended.

<table>
<thead>
<tr>
<th>Summary for Continuing Education Course Approval</th>
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<tbody>
<tr>
<td>1. Make application on Form DH 374.</td>
</tr>
<tr>
<td>2. Attach a detailed course outline and a description of course objectives for live presentations &amp; all course materials (including post-test) for self-study courses.</td>
</tr>
<tr>
<td>3. Attach the instructor's CV/resume.</td>
</tr>
<tr>
<td>4. Attach a sample of the written certificate of course completion.</td>
</tr>
<tr>
<td>5. Attach a copy of approval by ASRT or other CE-approving group, if the course has been approved by such a CE-approving organization.</td>
</tr>
<tr>
<td>6. Submit all documentation 30 days before the presentation date.</td>
</tr>
</tbody>
</table>

VII. SUBMITTING ROSTERS FOR CREDIT
After the completion of the course, course participants must document attendance on the Form DH 406, “Continuing Education Roster” (see attached sample). Only those participant names and certificate numbers on the original Form DH 406 will be given credit for completing the course. Have the instructor sign Form DH 406. If it is not possible to get the instructor’s signature the provider should sign Form DH 406. The provider must send all Form DH 406 with the corresponding approved Form DH 374 to the address at the top of Form DH 406.

<table>
<thead>
<tr>
<th>Summary for Submitting Form DH 406</th>
</tr>
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<tbody>
<tr>
<td>1. Fill in the top portion of the original Form DH 406 from the information on the approved Form DH 374. Have those participants who completed the course print and bubble in their name and certificate number in the space provided.</td>
</tr>
<tr>
<td>2. Have the instructor or provider sign the roster.</td>
</tr>
<tr>
<td>3. Mail the original Form DH 406 with a copy of the approved Form DH 374 to our office within 30 days after the presentation date.</td>
</tr>
<tr>
<td>4. Keep copies of all information sent to the department for 3 years.</td>
</tr>
</tbody>
</table>

VIII. CONTINUING EDUCATION PROVIDER REQUIREMENTS

A provider of continuing education has certain responsibilities. Being a provider is a privilege. To maintain compliance with department rules, the provider is required to:

(a) Make application for each course approval on Form DH 374 at least 30 days prior to presentation date;

(b) Notify the department in writing of any changes in the provider’s contact person and address;

(c) Determine criteria for successful completion of a course and make this information available to participants prior to the beginning of the course;

(d) Provide evidence that the course instructor’s are qualified through education and experience in the subject to be presented;
(e) Adhere to regulations and the numbering system of courses and providers as assigned by this office;

(f) Document the accuracy of subject matter by reference or bibliography;

(g) Establish written policies and procedures for implementation of the continuing education program;

(h) Maintain a system of record keeping which provides for storage of individual course information;

(i) Maintain records for three years for inspection by the department;

(j) Provide each participant with written verification of attendance;

(k) Provide participants with an opportunity to evaluate the learning experiences, instructional methods, facilities and resources used for the course;

(l) Submit rosters for credit on DH Form 406 within 30 days of presentation date.

IX. VERIFICATION OF ATTENDANCE (CERTIFICATE REQUIREMENTS)

Written verification must be provided to all participants who complete the course. The provider must submit a sample copy of the course certificate along with Form DH 374. The following information must be on the certificate:

♦ Date of course completion

♦ Number of CE hours awarded

♦ Signature of the course instructor

♦ Name of the Florida approved CE Provider

♦ Approved-Florida Provider Number

♦ Course title

♦ Approved Florida Course Number
♦ Name and Florida license number of the participant
♦ A statement that the course has been approved by the Florida Department of Health Bureau of Radiation Control (FLDOH-BRC)

![Sample Certificate]

X. AUDITING OF CONTINUING EDUCATION COURSES

Staff members of the Bureau of Radiation Control conduct on-site announced and unannounced audits of continuing education courses throughout the state. The purpose of these audits is to assure that courses meet the content, instructor, presentation and administrative procedures that were originally approved. Participants in the program may be asked to evaluate the effectiveness of the course during an audit. Your cooperation is appreciated.

XI. DISCIPLINARY ACTIONS
Being a provider is a privilege. Providers who fail to meet the requirements of section VIII. may be acted against by the department, including suspension or revocation of their approved courses or approved provider status. Such failure may also result in technologist’s being denied credit for such courses.

The department may also revoke approval of a continuing education provider and its approved courses if the provider’s certification has been revoked, suspended, or otherwise acted against by a national organization; by a specialty board recognized by the department; or by a certification authority of another state, territory, or country. The department may establish by rule additional guidelines and criteria for the discipline of continuing education providers.

XII. MANDATORY HIV/AIDS EDUCATION

All certificate holders must complete a 4-hour, HIV/AIDS education program as a condition of holding a certificate in one of the radiologic technology categories. If the technologist has not completed an approved program at the time of initial certification, upon receipt of affidavit, they may show good cause to be given up to 6 months to complete this 4-hour course and provide proof to the department.

The HIV/AIDS program must meet minimum course content and be 4 hours in duration. This office must approve the course 30 days before the presentation date.

The 4-hour HIV/AIDS education course is in addition to the 12-hour continuing education requirement and is not approved for CE credit.

HIV/AIDS Education Course Content

1. Description of HIV/AIDS infection and AIDS-
   a. The AIDS epidemic;
   b. Basic immunology and virology;
   c. Definition and stages of the disease;
   d. Epidemiology of HIV infection;
   e. Clinical care; and
   f. HIV counseling, testing, and partner notification.

2. Transmission of HIV-
   a. Sexual transmission;
   b. Blood and blood products transmission;
   c. Prenatal transmission; and
   d. Non-transmission.
3. Prevention and Control of HIV Infection-

a. Sexual:
   (I) Abstinence;
   (II) Monogamy; and
   (III) Safer Sex.

b. Nonsexual:
   (I) Abstinence from IV drug use;
   (II) Substance abuse rehabilitation; and
   (III) Clean needles and syringes.

c. Perinatal

d. Universal Precautions.

4. Attitude and Behavior Change-

a. Conquer fear through knowledge and education
b. Personalized safer behaviors; and
c. Maintain healthy lifestyles.

5. Legal Issues (Florida) -

a. confidentiality;
   b. Informed consent;
   c. Non-discrimination; and
   d. Case reporting by physicians.

6. Policy Development-

a. Workplace issues;
   (I) Working with HIV/AIDS patients;
   (II) Personnel with HIV/AIDS;
   (III) Testing of personnel and patients; and
   (IV) Confidentiality issues and patients/informed consent.

All providers of HIV/AIDS education are required to provide a Certificate of Completion to all persons who complete the course. It is the responsibility of the attendee to submit the certificate to the department in order to receive proper credit. The Certificate of Completion must be on file in this office for certificate holders to renew their license.

All providers of HIV/AIDS education are required to provide a Certificate of Completion to all persons who complete the course. It is the responsibility of the attendee to submit the certificate to the department in order to receive proper credit. The Certificate of Completion must be on file in this office for certificate holders to renew their license.
As part of the renewal process, all technologists are required to complete a one-hour mandatory HIV/AIDS update program. The requirements are an abbreviated version of the four-hour program with emphasis on modes of transmission, infection control procedures, clinical management, and current Florida law.


**XIV. FORM DH 374 & FORM DH 406**

Attached are copies of Form DH 374 and Form DH 406.

Additional copies of Form DH 374 can be obtained from the “Forms and Documents” link on the Bureau of Radiation Control’s internet site at [www.myfloridaEH.com/radiation/radtech1.htm](http://www.myfloridaEH.com/radiation/radtech1.htm) or by contacting the Continuing Educator Coordinator at (850) 245-4266, or by mail at:

```
ATTN: CE Coordinator
DOH Radiation Control
Bin #C21
4052 Bald Cypress Way
Tallahassee, FL  32399-1741
```

Since Form DH 406 is a scanable form, **originals** must always be used. Do not submit an original Form DH 406 with folds or staples. To request additional originals of Form DH 406 you must contact the department in writing. Make sure to include your provider number.
CE PROVIDER INFORMATION SHEET
BUREAU OF RADIATION CONTROL

OFFICE USE ONLY

COURSE #: ____________

CONTENT: ____________

DISPOSITION: ____________

HOURS: ____________

REVIEWER: ____________

LOCATION:

Location of training: ______________________ Zip Code: ______________________

Date(s) of proposed presentation: ______________________ Time: ______________________

THIS FORM MUST BE POSTMARKED NO LATER THAN 30 DAYS PRIOR TO THE INITIAL DATE.

Title of course: ______________________

Number of continuing education (CE) credits requested (50 minutes of education = 1 hour credit): ________

Criteria for satisfactory completion: Attendance (only if live lecture) _____ or Post-test (attach copy) _____

Instructor’s name & title: ____________________________________________________________

Instructor’s resume/curriculum vitae attached: Yes _____ No_____ On File With DOH: ____________

Course Format: Live lecture _____ or self study ___. If self study, give type: Online, DVD/CD, Other_____

Is course approved by ASRT or other CE-approving group? Yes __ No__ (If Yes, attach copy of approval)

NOTE: Attach a detailed course outline and description of course objectives to this form. If self-study, submit a copy of the self-study materials for review. If online, provide online access instructions.

OFFICE USE ONLY

Date Application Received: ______________________

Course Description: Sufficient_____ Insufficient_____ On File_____

Instructor(s) Vitae: Yes_____ No______ On File_____

Date Application Reviewed: ______________________

SEND MATERIALS TO:

US Postal Mail Address OR Overnight Mail Address

ATTN: CE COORDINATOR
DOH RADIATION CONTROL
BIN #C21
4052 BALD CYPRESS WAY
TALLAHASSEE, FL 32399-1741

ATTN: CE COORDINATOR
DOH RADIATION CONTROL
ROOM 220.01
4042 BALD CYPRESS WAY
TALLAHASSEE, FL 32399

DH Form 374, 10/07 (Replaces previous editions)
# Continuing Education Roster

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This section must be completed in its entirety by the provider.

Do not staple or fold this form.

Instructor's Name: ___________________________  Instructor's Signature: ___________________________

This section to be completed by course attendees.

Please turn over.