



# **RADIOLOGICAL PERSONNEL**

**Chapter 468, Part IV, Florida Statutes**

**Chapter 64E-3, Florida Administrative Code**

**With Attachments**

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**Chapter 468, Part IV, FS**  
**RADIOLOGICAL PERSONNEL CERTIFICATION**  
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**468.3001 Short title.—This part may be cited as the “Radiological Personnel Certification Act.”**

History.—ss. 1, 19, ch. 84-269; s. 4, ch. 91-429; s. 1, ch. 2006-139.

**468.3003 Declaration of policy.**—It is declared to be the policy of the state that the health and safety of the people must be protected against the harmful effects of excessive and improper exposure to ionizing radiation. Such protection can in some major measure be accomplished by requiring adequate training and experience of persons who use radiation and radiation-emitting equipment in each particular case under the specific direction of licensed practitioners. It is the purpose of this part to establish standards of education, training, and experience and to require the examination and certification of users of radiation and radiation-emitting equipment. History.—s. 1, ch. 78-383; s. 2, ch. 81-318; ss. 2, 18, 19, ch. 84-269; s. 4, ch. 91-429.

Note.—Former s. 468.30.

**468.301 Definitions.**—As used in this part, the term:

(1) “Basic X-ray machine operator” means a person who is employed by a licensed practitioner to perform certain radiographic functions, specifically excluding nuclear medicine and radiation therapy procedures, under the direct supervision of that practitioner.

(2) “Basic X-ray machine operator-podiatric medicine” means a person who is employed by and under the direct supervision of a licensed podiatric physician to perform only those radiographic functions that are within the scope of practice of a podiatric physician licensed pursuant to chapter 461, specifically excluding nuclear medicine and radiation therapy procedures.

(3) “Certificate” means a certification granted and issued by the department under this part.

(4) "Certificateholder" means any person who holds a certificate under this part that authorizes that person to use radiation on human beings.

(5) "Council" means the Advisory Council on Radiation Protection.

(6) "Department" means the Department of Health.

(7) "Direct supervision" means supervision and control by a licensed practitioner who assumes legal liability for the services rendered by the basic X-ray machine operator or basic X-ray machine operator-podiatric medicine, which supervision requires the physical presence of the licensed practitioner for consultation and direction of the actions of the basic X-ray machine operator or basic X-ray machine operator-podiatric medicine.

(8) "Educational program" means training or education, including either a didactic or a clinical practicum, or both, which has a specified objective, planned activities for students, and suitable methods for measuring student attainment, which program is offered, sponsored, or approved by an organization or institution that is able to meet or enforce these criteria and which program is subject to approval by the department.

(9) "General radiographer" means a person who is employed and certificated in radiography, other than a basic X-ray machine operator or basic X-ray machine operator-podiatric medicine.

(10) "General supervision" means supervision whereby a practitioner authorizes the services to be performed by the radiologic technologist, which supervision, except in cases of emergency, requires the easy availability or physical presence of the licensed practitioner for consultation and direction of the actions of the radiologic technologist.

(11) "Licensed practitioner" means a person who is licensed or otherwise authorized by law to practice medicine, podiatric medicine, chiropody, osteopathic medicine, naturopathy, or chiropractic medicine in this state.

(12) "National organization" means a professional association or registry, approved by the department, that examines, registers, certifies, or approves individuals and educational programs relating to operators of sources of radiation.

(13) "Person" means any individual, corporation, partnership, firm, association, trust, estate, public or private institution, group, agency, political subdivision of this state or any other state, or political subdivision of any agency thereof and any legal successor, representative, agent, or agency of the foregoing.

(14) "Radiation" means X rays and gamma rays, alpha and beta particles, high-speed electrons, neutrons, and other nuclear particles.

(15) "Radiologic technologist" means a person, other than a licensed practitioner, who is qualified by education, training, or experience, as more specifically defined in s. 468.302(3)(d)-(g), to use radiation on human beings under the specific direction and general supervision of a licensed practitioner in each particular case.

(16) "Radiologist" means a physician specializing in radiology certified by or eligible for certification by the American Board of Radiology or the American Osteopathic Board of Radiology, the British Royal College of Radiology, or the Canadian College of Physicians and Surgeons.

(17) "Radiologist assistant" means a person, other than a licensed practitioner, who is qualified by education and certification, as set forth in s. 468.304, as an advanced-level radiologic technologist who works under the supervision of a radiologist to enhance patient care by assisting the radiologist in the medical imaging environment.

(18) "Specialty technologist" means a person, other than a licensed practitioner, who is qualified by education and certification, as set forth in s. 468.304, to use radiation on human beings under the specific direction and general supervision of a licensed practitioner.

History.—s. 2, ch. 78-383; s. 2, ch. 81-318; ss. 3, 18, 19, ch. 84-269; s. 1, ch. 88-310; s. 4, ch. 91-429; s. 73, ch. 97-237; s. 51, ch. 97-264; ss. 211, 281, ch. 98-166; s. 2, ch. 2006-139; s. 91, ch. 2008-6; s. 1, ch. 2012-168.

**468.302 Use of radiation; identification of certified persons; limitations; exceptions.—**

(1) Except as provided in this section, a person may not use radiation or otherwise practice radiologic technology or any of the duties of a radiologist assistant on a human being unless he or she:

(a) Is a licensed practitioner;

(b) Is the holder of a certificate, as provided in this part, and is operating under the direct supervision or general supervision of a licensed practitioner in each particular case; or

(c) Is the holder of a radiologist assistant certificate, as provided in this part, and is operating under the supervision of a radiologist, as specified in paragraph (3)(h).

(2)(a) A person holding a certificate as a basic X-ray machine operator may use the title "Basic X-ray Machine Operator."

(b) A person holding a certificate as a basic X-ray machine operator-podiatric medicine may use the title "Basic X-ray Machine Operator-Podiatric Medicine."

(c) A person holding a certificate as a general radiographer may use the title "Certified Radiologic Technologist-Radiographer" or the letters "CRT-R" after his or her name.

(d) A person holding a certificate as a limited computed tomography technologist may use the title "Certified Radiologic Technologist-Computed Tomography" or the letters "CRT-C" after his or her name.

(e) A person holding a certificate as a radiation therapy technologist may use the title "Certified Radiologic Technologist-Therapy" or the letters "CRT-T" after his or her name.

(f) A person holding a certificate as a nuclear medicine technologist may use the title "Certified Radiologic Technologist-Nuclear Medicine" or the letters "CRT-N" after his or her name.

(g) A person holding a certificate as a radiologist assistant may use the title "Certified Radiologist Assistant" or the letters "CRA" after his or her name.

(h) A person holding a certificate as a specialty technologist may use the title "Certified Radiologic Technologist-X" or the letters "CRT-X" after his or her name, where "X" represents a single- or multiple-letter designation signifying the advanced, postprimary, or specialty area of radiologic technology, such as "CT" for computed tomography or "PET" for positron emission tomography, in which the person is certified by a national organization. The department shall approve these letter designations by rule for each area, consistent with the designation used by a national organization.

No other person is entitled to so use a title or letters contained in this subsection or to hold himself or herself out in any way, whether orally or in writing, expressly or by implication, as being so certified.

(3)(a) A person holding a certificate as a basic X-ray machine operator may perform general diagnostic radiographic and general fluoroscopic procedures, specifically excluding nuclear medicine and radiation therapy procedures, under the direct supervision and control of a licensed practitioner in that practitioner's office or in a hospital pursuant to paragraph (b). A basic X-ray machine operator may participate in additional approved programs as provided by rule of the department.

(b) A basic X-ray machine operator or basic X-ray machine operator-podiatric medicine may not practice radiologic technology in walk-in emergency centers, freestanding breast clinics, freestanding cancer clinics, state mental hospitals, state correctional institutions, or in any facility regulated under chapter 390, chapter 392, chapter 393, chapter 394, or chapter 641. For a facility licensed under chapter 395, a basic X-ray machine operator may only perform the procedures specified in paragraph (a) in a hospital with a capacity of 150 beds or less. If such a hospital has or acquires radiographic or fluoroscopic equipment other than general diagnostic radiographic and general fluoroscopic equipment, that hospital shall keep a record documenting which personnel performed each radiographic or fluoroscopic procedure. For purposes of this paragraph, a walk-in emergency center shall not include a physician-operated walk-in clinic which operates with or without appointments and with extended hours and which does not hold itself out to the public as an emergency center.

(c) A person holding a certificate as a basic X-ray machine operator-podiatric medicine may perform only podiatric radiographic procedures under the direct supervision and control of a licensed podiatric physician.

(d) A person holding a certificate as a general radiographer may not perform nuclear medicine and radiation therapy procedures, except as provided in this paragraph. A person who is a general radiographer certified pursuant to this part who receives additional training and skills in radiation therapy technology procedures as referenced in this paragraph may assist with managing patients undergoing radiation therapy treatments if that assistance is provided to a person registered with the American Registry of Radiologic Technologists in radiation therapy who is also certified pursuant to this part as a radiation therapy technologist. Both the general radiographer and the radiation therapy technologist must perform these radiation therapy services under the general supervision of a physician licensed under chapter 458 or chapter 459 who is trained and skilled in performing radiation therapy treatments. The radiation therapy technologist identified under this paragraph may not delegate any function to the general radiographer which could reasonably be expected to create an unnecessary danger to a patient's life, health, or safety. The general radiographer identified under this section may not, however, perform the following services while assisting the radiation therapy technologist: radiation treatment planning, calculation of radiation therapy doses, or any of the duties of a medical physicist. The general radiographer identified under this section must successfully complete a training program in the following areas before assisting with radiation therapy technology duties:

1. Principles of radiation therapy treatment;
  2. Biological effects of radiation;
  3. Radiation exposure and monitoring;
  4. Radiation safety and protection;
  5. Evaluation and handling of radiographic treatment equipment and accessories;
- and
6. Patient positioning for radiation therapy treatment.

<p>*Chapter 390 – Abortion Clinics Chapter 392 – Tuberculosis (TB) Control Facilities Chapter 393 – Developmental Disability Facilities Chapter 394 – Mental Health Facilities Chapter 395 – Hospitals, Ambulatory Surgical Centers and Mobile Surgical Facilities</p>
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In addition, a general radiographer may participate in additional approved programs as provided by rule of the department.

(e) A person holding a certificate as a limited computed tomography technologist may perform only diagnostic computed tomography examinations.

(f) A person holding a certificate as a radiation therapy technologist may administer only X radiation and ionizing radiation emitted from particle accelerators and external beam teletherapy from sealed sources of radioactive material to human beings for therapeutic or simulation purposes.

(g) 1. A person holding a certificate as a nuclear medicine technologist may only:

a. Conduct in vivo and in vitro measurements of radioactivity and administer radiopharmaceuticals to human beings for diagnostic and therapeutic purposes.

b. Administer X radiation from a combination nuclear medicine-computed tomography device if that radiation is administered as an integral part of a nuclear medicine procedure that uses an automated computed tomography protocol for the purposes of attenuation correction and anatomical localization and the person has received device-specific training on the combination device.

2. The authority of a nuclear medicine technologist under this paragraph excludes:

a. Radioimmunoassay and other clinical laboratory testing regulated pursuant to chapter 483;

b. Creating or modifying automated computed tomography protocols; and

c. Any other operation of a computed tomography device, especially for the purposes of stand-alone diagnostic imaging, which must be performed by a general radiographer certified under this part.

(h) A person holding a certificate as a radiologist assistant may:

1. Perform specific duties allowed for a radiologist assistant as defined by the department by rule. The rule must be consistent with guidelines adopted by the American College of Radiology, the American Society of Radiologic Technologists, and the American Registry of Radiologic Technologists, with the level of supervision required by such guidelines.

2. Not perform nuclear medicine or radiation therapy procedures unless currently certified and trained to perform those duties under the person's nuclear medicine technologist or radiation therapy technologist certificate; not interpret images; not make diagnoses; and not prescribe medications or therapies.

(i) A person holding a certificate as a specialty technologist may perform the specific duties allowed for a specialty technologist as defined by rule of the department. These duties must fall within the scope of practice for that particular advanced, postprimary, or specialty area as set by a national organization.

(4) A person holding a certificate as a radiologic technologist may only use radiation or radiation-producing equipment on human beings for diagnostic or therapeutic purposes while operating, in each particular case, under the general supervision of a licensed practitioner and only if the application of radiation is limited to those persons or parts of the human body specified in the law under which the practitioner is licensed.

(5) Nothing contained in this part relating to radiologic technology or a radiologist assistant shall be construed to limit, enlarge, or affect in any respect the practice by duly licensed practitioners of their respective professions.

(6) Requirement for certification does not apply to:

(a) A hospital resident who is not a licensed practitioner in this state or a student enrolled in and attending a school or college of medicine, osteopathic medicine, chiropody, podiatric medicine, or chiropractic medicine or a radiologic technology educational program or radiologist assistant educational program and who applies

radiation to a human being while under the direct supervision of a licensed practitioner.

(b) A person who is engaged in performing the duties of a radiologic technologist or of a radiologist assistant in his or her employment by a governmental agency of the United States.

(c) A person who is trained and skilled in cardiopulmonary technology and who provides cardiopulmonary technology services at the direction, and under the direct supervision, of a licensed practitioner.

(7) A person who is licensed pursuant to chapter 483 to perform nuclear medicine procedures is not required to be certificated under this part, provided such person does not perform any other procedures regulated under this part.

History.—s. 3, ch. 78-383; s. 2, ch. 81-318; ss. 4, 18, 19, ch. 84-269; s. 13, ch. 86-287; s. 2, ch. 88-310; s. 4, ch. 91-429; s. 6, ch. 96-309; s. 1113, ch. 97-103; s. 52, ch. 97-264; ss. 212, 282, ch. 98-166; s. 108, ch. 2001-277; s. 38, ch. 2004-350; s. 3, ch. 2006-139; s. 2, ch. 2012-168.

**468.303 Rules.**—The department is authorized to make such rules, not inconsistent with law, as may be necessary to carry out the provisions of this part. The department is authorized to establish by rule fees to be paid for application, examination, reexamination, certification, and renewal, and for recordmaking and recordkeeping, provided that no fee shall exceed the amounts provided in this part. Fees shall be based on department estimates of the revenue required to implement the provisions of this part. The department may, based upon estimates of revenue required to implement this part, establish separate fee schedules for application, examination, reexamination, certification, and renewal for the different categories of certification.

History.—s. 4, ch. 78-383; s. 2, ch. 81-318; ss. 18, 19, ch. 84-269; s. 3, ch. 88-310; s. 4, ch. 91-429.

**468.304 Certification.**—The department shall certify any applicant who meets the following criteria:

(1) Pays to the department a nonrefundable fee that may not exceed \$100, plus the actual per-applicant cost to the department for purchasing the examination from a national organization.

(2) Submits a completed application on a form specified by the department. An incomplete application expires 6 months after initial filing. The application must include the social security number of the applicant. Each applicant shall notify the department in writing of his or her current mailing address. Notwithstanding any other law, service by regular mail to an applicant's last reported mailing address constitutes adequate and sufficient notice of any official departmental communication to the applicant.

(3) Submits satisfactory evidence, verified by oath or affirmation, that she or he:

(a) Is at least 18 years of age at the time of application;

(b) Is a high school, vocational school, technical school, or college graduate or has successfully completed the requirements for a graduate equivalency diploma (GED) or its equivalent;

(c) Is of good moral character;

(d) Has passed an examination as specified in s. 468.306 or meets the requirements specified in s. 468.3065; and

(e) 1. Has successfully completed an educational program, which program may be established in a hospital licensed pursuant to chapter 395 or in an accredited

postsecondary academic institution which is subject to approval by the department as maintaining a satisfactory standard; or

2.a. With respect to an applicant for a basic X-ray machine operator's certificate, has completed a course of study approved by the department with appropriate study material provided the applicant by the department;

b. With respect to an applicant for a basic X-ray machine operator-podiatric medicine certificate, has completed a course of study approved by the department, if such course of study is limited to the information necessary to perform radiographic procedures within the scope of practice of a podiatric physician licensed pursuant to chapter 461;

c. With respect only to an applicant for a general radiographer's certificate who is a basic X-ray machine operator certificateholder, has completed an educational program or a 2-year training program that takes into account the types of procedures and level of supervision usually and customarily practiced in a hospital, which educational or training program complies with the rules of the department;

d. With respect only to an applicant for a nuclear medicine technologist's certificate who is a general radiographer certificateholder, has completed an educational program or a 2-year training program that takes into account the types of procedures and level of supervision usually and customarily practiced in a hospital, which educational or training program complies with the rules of the department;

e. With respect to an applicant for a radiologist assistant's certificate, demonstrates to the department that he or she holds a current certificate or registration as a radiologist assistant granted by the American Registry of Radiologic Technologists; or

f. With respect to an applicant for a specialty technologist's certificate, demonstrates to the department that he or she holds a current certificate or registration granted by a national organization in a particular advanced, postprimary, or specialty area of radiologic technology, such as computed tomography or positron emission tomography.

(4) Submits complete documentation of any criminal offense in any jurisdiction of which the applicant has been found guilty, regardless of whether adjudication of guilt was withheld, or to which the applicant has pled guilty or nolo contendere.

(5) Submits complete documentation of any final disciplinary action taken against the applicant by a licensing or regulatory body in any jurisdiction, by a national organization, or by a specialty board that is recognized by the department. Disciplinary action includes revocation, suspension, probation, reprimand, or being otherwise acted against, including being denied certification or resigning from or nonrenewal of membership taken in lieu of or in settlement of a pending disciplinary case.

The department may not certify any applicant who has committed an offense that would constitute a violation of any of the provisions of s. 468.3101 or applicable rules if the applicant had been certified by the department at the time of the offense. An application for a limited computed tomography certificate may not be accepted. A person holding a valid computed tomography certificate as of October 1, 1984, is subject to s. 468.309.

History.—s. 5, ch. 78-383; s. 2, ch. 81-318; ss. 5, 18, 19, ch. 84-269; s. 4, ch. 88-310; s. 4, ch. 91-429; s. 283, ch. 97-103; s. 213, ch. 98-166; s. 57, ch. 99-397; s. 39, ch. 2004-350; s. 4, ch. 2006-139; s. 3, ch. 2012-168.

**468.305 Certification; standards.**—The department shall develop standards for certification for the categories of radiological personnel or procedures specified in s. 468.302. The certification standards shall be developed by the department to provide



for educational programs for persons who are duly licensed or have a credential in a recognized health care profession or who have other training that is relevant to the program of study to be undertaken. All such categories shall include a demonstration of safety procedure competency; however, nothing in this part shall be construed to require that all operators of radiation equipment be registered radiologic technologists. An application fee of not more than \$350 shall be assessed those educational programs seeking approval from the department. Application for approval shall be made on forms provided by the department. Once approved by the department, an educational program shall be assessed an annual fee not to exceed \$150.

History.—s. 6, ch. 78-383; s. 2, ch. 81-318; ss. 6, 18, 19, ch. 84-269; s. 5, ch. 88-310; s. 4, ch. 91-429.

**468.306 Examinations.**—An applicant for certification as a radiologic technologist, basic X-ray machine operator, or basic X-ray machine operator-podiatric medicine, except an applicant certified pursuant to s. 468.3065, shall be required to pass an examination. An applicant for certification as a specialty technologist shall be certified only in accordance with s. 468.3065. An application for certification as a specialty technologist by examination may not be accepted. In lieu of an examination for a radiologist assistant certificate, the department shall accept a demonstration by the applicant for such a certificate that he or she holds a current certificate or registration as a radiologist assistant granted by the American Registry of Radiologic Technologists. The department may develop or use examinations for each type of certificate. The department may require an applicant who does not pass an examination after five attempts to complete additional remedial education, as specified by rule of the department, before admitting the applicant to subsequent examinations.

(1)The department may contract with organizations that develop such test examinations. Examinations may be administered by the department or the contracting organization.

(2)Examinations shall be given for each type of certificate at least twice a year at such times and places as the department may determine to be advantageous for applicants.

(3)All examinations must be written and must include positioning, technique, and radiation protection. The department shall pass or fail each applicant on the basis of his or her final grade. The examination for a basic X-ray machine operator must include basic positioning and basic techniques directly related to the skills necessary to safely operate radiographic equipment.

(4)A nonrefundable fee not to exceed \$75 plus the actual per-applicant cost for purchasing the examination from a national organization shall be charged for any subsequent examination.

History.—s. 7, ch. 78-383; s. 2, ch. 81-318; ss. 7, 18, 19, ch. 84-269; s. 6, ch. 88-310; s. 4, ch. 91-429; s. 284, ch. 97-103; s. 26, ch. 98-151; s. 58, ch. 99-397; s. 40, ch. 2004-350; s. 5, ch. 2006-139; s. 4, ch. 2012-168.

**468.3065 Certification by endorsement.**—

(1)The department may issue a certificate by endorsement to practice as a radiologist assistant to an applicant who, upon applying to the department and remitting a nonrefundable fee not to exceed \$50, demonstrates to the department that he or she holds a current certificate or registration as a radiologist assistant granted by the American Registry of Radiologic Technologists.

(2)The department may issue a certificate by endorsement to practice radiologic technology to an applicant who, upon applying to the department and remitting a nonrefundable fee not to exceed \$50, demonstrates to the department that he or she holds a current certificate, license, or registration to practice radiologic technology, provided that the requirements for such certificate, license, or registration are deemed by the department to be substantially equivalent to those established under this part and rules adopted under this part.

(3)The department may issue a certificate by endorsement to practice as a specialty technologist to an applicant who, upon applying to the department and remitting a nonrefundable fee not to exceed \$100, demonstrates to the department that he or she holds a current certificate or registration from a national organization in a particular advanced, postprimary, or specialty area of radiologic technology, such as computed tomography or positron emission tomography.

History.—ss. 7, 19, ch. 84-269; s. 4, ch. 91-429; s. 285, ch. 97-103; s. 41, ch. 2004-350; s. 6, ch. 2006-139; s. 5, ch. 2012-168.

#### **468.307 Certificate; issuance; display.—**

(1)The department shall issue a certificate to each candidate who has met the requirements of ss. 468.304 and 468.306 or has qualified under s. 468.3065. The department may by rule establish a subcategory of a certificate issued under this part limiting the certificateholder to a specific procedure or specific type of equipment. The first regular certificate issued to a new certificateholder expires on the last day of the certificateholder's birth month and shall be valid for at least 12 months but no more than 24 months. However, if the new certificateholder already holds a regular, active certificate in a different category under this part, the new certificate shall be combined with and expire on the same date as the existing certificate.

(2)(a)The department may, at its discretion, issue a temporary certificate to:

1.An applicant who has completed an educational program and is awaiting examination for a certificate specified in s. 468.302(2)(b), (c), (e), or (f), if the applicant has met all other requirements established pursuant to s. 468.304.

2.A basic X-ray machine operator, if such person is under the direct supervision of a licensed practitioner and the licensed practitioner has not requested issuance of a temporary certificate within the previous 18 months, upon application by a licensed practitioner who is practicing in an office of five or fewer licensed practitioners.

3.A basic X-ray machine operator-podiatric medicine, if such person is under the direct supervision of a licensed podiatric physician and the licensed podiatric physician has not requested issuance of a temporary certificate within the previous 18 months, upon application by a licensed podiatric physician who is practicing in an office of five or fewer licensed podiatric physicians.

(b)1.A temporary certificate, as provided in this subsection, shall be issued only if the department finds that its issuance will not violate the purposes of this part or tend to endanger the public health and safety. Temporary certificates shall not be extended, renewed, or reissued.

2.A temporary certificate shall expire automatically 6 months after the date of issuance or when the determination is made either to issue to the applicant, or to deny him or her the issuance of, a regular certificate.

(3)Every employer of certificateholders shall display the certificates of all of such employees in a place accessible to view.

History.—s. 8, ch. 78-383; s. 2, ch. 81-318; ss. 8, 18, 19, ch. 84-269; s. 7, ch. 88-310; s. 4, ch. 91-429; s. 286, ch. 97-103; s. 214, ch. 98-166; s. 129, ch. 99-397; s. 126, ch. 2000-153; s. 42, ch. 2004-350; s. 7, ch. 2006-139.

**468.309 Certificate;** duration; renewal; reversion to inactive status; members of Armed Forces and spouses.—

(1)(a)A certificate issued in accordance with this part expires as specified in rules adopted by the department which establish a procedure for the biennial renewal of certificates. A certificate shall be renewed by the department for a period of 2 years upon payment of a renewal fee in an amount not to exceed \$75 and upon submission of a renewal application containing such information as the department deems necessary to show that the applicant for renewal is a certificateholder in good standing and has completed any continuing education requirements that the department establishes.

(b)Sixty days before the end of the biennium, the department shall mail a notice of renewal to the last known address of the certificateholder.

(c)Each certificateholder shall notify the department in writing of his or her current mailing address and place of practice. Notwithstanding any other law, service by regular mail to a certificateholder's last reported mailing address constitutes adequate and sufficient notice of any official departmental communication to the certificateholder.

(2)The department shall adopt rules establishing a procedure for the biennial renewal of certificates.

(3)The department may, by rule, prescribe continuing education requirements, not to exceed 24 hours each licensure period, as a condition for renewal of a certificate. The criteria for approval of continuing education providers, courses, and programs shall be as specified by the department. Continuing education, which may be required for persons certified under this part, may be obtained through home study courses approved by the department.

(4)Any certificate that is not renewed by its expiration date shall automatically be placed in an expired status, and the certificateholder may not practice radiologic technology or perform the duties of a radiologist assistant until the certificate has been reactivated.

(5)A certificateholder in good standing remains in good standing when he or she becomes a member of the Armed Forces of the United States on active duty without paying renewal fees or accruing continuing education credits as long as he or she is a member of the Armed Forces on active duty and for a period of 6 months after discharge from active duty, if he or she is not engaged in practicing radiologic technology or performing the duties of a radiologist assistant in the private sector for profit. The certificateholder must pay a renewal fee and complete continuing education not to exceed 12 classroom hours to renew the certificate.

(6)A certificateholder who is in good standing remains in good standing if he or she is absent from the state because of his or her spouse's active duty with the Armed Forces of the United States. The certificateholder remains in good standing without paying renewal fees or completing continuing education as long as his or her spouse is a member of the Armed Forces on active duty and for a period of 6 months after the spouse's discharge from active duty, if the certificateholder is not engaged in practicing radiologic technology or performing the duties of a radiologist assistant in the private sector for profit. The certificateholder must pay a renewal fee and complete continuing education not to exceed 12 classroom hours to renew the certificate.

(7)A certificateholder may resign his or her certification by submitting to the department a written, notarized resignation on a form specified by the department. The resignation automatically becomes effective upon the department's receipt of the resignation form, at which time the certificateholder's certification automatically becomes null and void and may not be reactivated or renewed or used to practice radiologic technology or to perform the duties of a radiologist assistant. A

certificateholder who has resigned may become certified again only by reapplying to the department for certification as a new applicant and meeting the certification requirements pursuant to s. 468.304 or s. 468.3065. Any disciplinary action that had been imposed on the certificateholder prior to his or her resignation shall be tolled until he or she again becomes certified. Any disciplinary action proposed at the time of the certificateholder's resignation shall be tolled until he or she again becomes certified.

History.—s. 10, ch. 78-383; s. 2, ch. 81-318; ss. 10, 18, 19, ch. 84-269; s. 8, ch. 88-310; s. 4, ch. 91-145; s. 4, ch. 91-429; s. 287, ch. 97-103; s. 59, ch. 99-397; s. 43, ch. 2004-350; s. 8, ch. 2006-139.

**468.3095 Inactive status; reactivation; automatic suspension; reinstatement.—**

(1)A certificateholder may request that his or her certificate be placed in an inactive status by making application to the department and paying a fee in an amount set by the department not to exceed \$50.

(2)(a)A certificate that has been expired for less than 10 years may be reactivated upon payment of the biennial renewal fee and a late renewal fee, not to exceed \$100, and submission of a reactivation application containing any information that the department deems necessary to show that the applicant is a certificateholder in good standing and has met the requirements for continuing education. The department shall prescribe, by rule, continuing education requirements as a condition of reactivating a certificate. The continuing education requirements for reactivating a certificate may not exceed 10 classroom hours for each year the certificate was expired and may not exceed 100 classroom hours for all years in which the certificate was expired.

(b)A certificate that has been inactive for less than 10 years may be reactivated by meeting all of the requirements of paragraph (a) for expired certificates, except for payment of the fee for late renewal.

(c)A certificate that has been inactive or expired for 10 years or more automatically becomes null and void and may not be reactivated, renewed, or used to practice radiologic technology or to perform the duties of a radiologist assistant. A certificateholder whose certificate has become null and void may become certified again only by reapplying to the department as a new applicant and meeting the requirements of s. 468.304 or s. 468.3065.

(d)When an expired or inactive certificate is reactivated, the reactivated certificate expires on the last day of the certificateholder's birth month and shall be valid for at least 12 months but no more than 24 months. However, if the reactivating certificateholder already holds a regular, active certificate in a different category under this part, the reactivated certificate shall be combined with and expire on the same date as the existing certificate.

History.—ss. 11, 19, ch. 84-269; s. 4, ch. 91-429; s. 288, ch. 97-103; s. 44, ch. 2004-350; s. 9, ch. 2006-139.

**468.3101 Disciplinary grounds and actions.—**

(1)The department may make or require to be made any investigations, inspections, evaluations, and tests, and require the submission of any documents and statements, which it considers necessary to determine whether a violation of this part has occurred. The following acts shall be grounds for disciplinary action as set forth in this section:

(a)Procuring, attempting to procure, or renewing a certificate by bribery, by fraudulent misrepresentation, or through an error of the department.

(b) Having a voluntary or mandatory certificate to practice radiologic technology or to perform the duties of a radiologist assistant revoked, suspended, or otherwise acted against, including being denied certification, by a national organization; by a specialty board recognized by the department; or by a certification authority of another state, territory, or country.

(c) Being convicted or found guilty, regardless of adjudication, in any jurisdiction of a crime that directly relates to the practice of radiologic technology or to the performance of the duties of a radiologist assistant, or to the ability to practice radiologic technology or the ability to perform the duties of a radiologist assistant. Pleading nolo contendere shall be considered a conviction for the purpose of this provision.

(d) Being convicted or found guilty, regardless of adjudication, in any jurisdiction of a crime against a person. Pleading nolo contendere shall be considered a conviction for the purposes of this provision.

(e) Making or filing a false report or record that the certificateholder knows to be false, intentionally or negligently failing to file a report or record required by state or federal law, or willfully impeding or obstructing such filing or inducing another to do so. Such reports or records include only those reports or records which are signed in the capacity of the certificateholder.

(f) Engaging in unprofessional conduct, which includes, but is not limited to, any departure from, or the failure to conform to, the standards of practice of radiologic technology or the standards of practice for radiologist assistants as established by the department, in which case actual injury need not be established.

(g) Being unable to practice radiologic technology or to perform the duties of a radiologist assistant with reasonable skill and safety to patients by reason of illness or use of alcohol, drugs, narcotics, chemicals, or other materials or as a result of any mental or physical condition. A certificateholder affected under this paragraph shall, at reasonable intervals, be afforded an opportunity to demonstrate that he or she can resume the competent practice of his or her certified profession with reasonable skill and safety.

(h) Failing to report to the department any person who the certificateholder knows is in violation of this part or of the rules of the department.

(i) Violating any provision of this part, any rule of the department, or any lawful order of the department previously entered in a disciplinary proceeding or failing to comply with a lawfully issued subpoena of the department.

(j) Employing, for the purpose of applying ionizing radiation or otherwise practicing radiologic technology or performing the duties of a radiologist assistant on a human being, any individual who is not certified under the provisions of this part.

(k) Testing positive for any drug, as defined in s. 112.0455, on any confirmed preemployment or employer-required drug screening when the certificateholder does not have a lawful prescription and legitimate medical reason for using such drug.

(l) Failing to report to the department in writing within 30 days after the certificateholder has had a voluntary or mandatory certificate to practice radiologic technology or to perform the duties of a radiologist assistant revoked, suspended, or otherwise acted against, including being denied certification, by a national organization, by a specialty board recognized by the department, or by a certification authority of another state, territory, or country.

(m) Having been found guilty of, regardless of adjudication, or pleading guilty or nolo contendere to, any offense prohibited under s. 435.04 or similar statute of another jurisdiction.

(n) Failing to comply with the recommendations of the department's impaired practitioner program for treatment, evaluation, or monitoring. A letter from the

director of the impaired practitioner program that the certificateholder is not in compliance shall be considered conclusive proof under this part.

(2) If the department finds any person or firm guilty of any of the grounds set forth in subsection (1), it may enter an order imposing one or more of the following penalties:

(a) Refusal to approve an application for certification.

(b) Revocation or suspension of a certificate.

(c) Imposition of an administrative fine not to exceed \$1,000 for each count or separate offense.

(d) Issuance of a reprimand.

(e) Placement of the certificateholder on probation for such period of time and subject to such conditions as the department may specify, including requiring the certificateholder to submit to treatment, to undertake further relevant education or training, to take an examination, or to work under the supervision of a licensed practitioner.

(3) The department shall not reinstate a person's certificate, or cause a certificate to be issued to a person it has deemed unqualified, until such time as the department is satisfied that such person has complied with all the terms and conditions set forth in the final order and is capable of safely engaging in the practice of his or her certified profession.

(4) The department shall, by rule, establish guidelines for the disposition of disciplinary cases involving specific types of violations. Such guidelines may include minimum and maximum fines, periods of suspension or probation, or conditions of probation or reissuance of a certificate.

(5) A final disciplinary action taken against a certificateholder in another jurisdiction, whether voluntary or mandatory, shall be considered conclusive proof of grounds for a disciplinary proceeding under this part.

(6) The department may 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, including, but not limited to, revoking approval of a continuing education provider or a continuing education course and refusing to approve a continuing education provider or continuing education course.

History.—ss. 15, 19, ch. 84-269; s. 9, ch. 88-310; s. 4, ch. 91-429; s. 289, ch. 97-103; s. 74, ch. 97-237; s. 45, ch. 2004-350; s. 10, ch. 2006-139; s. 52, ch. 2010-114.

**468.311 Violations; penalties.**—Each of the following acts constitutes a misdemeanor of the second degree, punishable as provided in s. 775.082 or s. 775.083:

(1) Practicing radiologic technology or performing the duties of a radiologist assistant without holding an active certificate to do so.

(2) Using or attempting to use a certificate which has been suspended or revoked.

(3) The willful practice of radiologic technology or the willful performance of the duties of a radiologist assistant by a student without a direct supervisor being present.

(4) Knowingly allowing a student to practice radiologic technology or perform the duties of a radiologist assistant without a direct supervisor being present.

(5) Obtaining or attempting to obtain a certificate under this part through bribery or fraudulent misrepresentation.

(6) Using any name or title specified in s. 468.302(2) or any other name or title which implies that a person is certified to practice radiologic technology or to perform the duties of a radiologist assistant, unless such person is duly certified as provided in this part.

(7) Knowingly concealing information relating to the enforcement of this part or rules adopted pursuant to this part.

(8) Employing, for the purpose of applying ionizing radiation to, or otherwise practicing radiologic technology or any of the duties of a radiologist assistant on, any human being, any individual who is not certified under the provisions of this part.

History.—s. 12, ch. 78-383; s. 2, ch. 81-318; ss. 12, 18, 19, ch. 84-269; s. 98, ch. 91-224; s. 4, ch. 91-429; s. 11, ch. 2006-139.

**468.3115 Injunctive relief.**—The practice of radiologic technology or the performance of the duties of a radiologist assistant in violation of this part, or the performance of any act prohibited in this part, is declared a nuisance inimical to the public health, safety, and welfare of this state. In addition to other remedies provided in this part, the department, or any state attorney in the name of the people of this state, may bring an action for an injunction to restrain such violation until compliance with the provisions of this part and the rules adopted pursuant to this part has been demonstrated to the satisfaction of the department.

History.—ss. 13, 19, ch. 84-269; s. 4, ch. 91-429; s. 12, ch. 2006-139.

**468.312 Fees; disposition.**—All moneys derived from fees imposed pursuant to this part shall be placed in the Radiation Protection Trust Fund to be used by the department for the sole purpose of carrying out the provisions of this part.

History.—s. 13, ch. 78-383; s. 2, ch. 81-318; ss. 14, 18, 19, ch. 84-269; s. 4, ch. 91-429.

**468.314 Advisory Council on Radiation Protection; appointment; terms; powers; duties.**—

(1) The Advisory Council on Radiation Protection is created within the Department of Health and shall consist of 16 persons to be appointed by the State Surgeon General for 3-year terms.

(2) The council shall be comprised of:

(a) A certified radiologic technologist-radiographer.

(b) A certified radiologic technologist-nuclear medicine.

(c) A certified radiologic technologist-therapy.

(d) A basic X-ray machine operator or a licensed practitioner who employs such an operator.

(e) A board-certified radiologist.

(f) A board-certified nuclear medicine physician.

(g) A certified health physicist.

(h) A certified radiologist assistant.

(i) A representative from the administration of a hospital affiliated with a radiologic technology educational program.

(j) An expert in environmental radiation matters.

(k) A chiropractic radiologist.

(l) A board-certified podiatric physician.

(m) A board-certified radiological physicist.

(n) A board-certified therapeutic radiologist or board-certified radiation oncologist.

(o) Two persons, neither of whom has ever been certified pursuant to this part or been a member of any closely related profession.

(3) The council shall meet at least twice a year, but no more than four times per year unless authorized by the State Surgeon General.

(4) Members of the council shall not receive compensation for their services; however, they are entitled to reimbursement for necessary travel expenses, pursuant to s. 112.061, from the funds derived from fees collected under the provisions of this part.

(5)(a) The council may recommend to the department examination procedures for applicants and minimum requirements for qualification of applicants.

(b) The council shall:

1. Recommend to the department a code of ethics for the certificateholder's practice of his or her certified profession.

2. Make recommendations for the improvement of continuing education courses.

3. Make recommendations to the department on matters relating to the practice of radiologic technology, the performance of the duties of a radiologist assistant, and radiation protection.

4. Study the utilization of medical imaging and nonionizing radiation, such as nuclear magnetic resonance or similarly related technology, and make recommendations to the department on the personnel appropriate to conduct such procedures and the minimum qualifications for such personnel.

History.—ss. 16, 17, 19, ch. 84-269; ss. 4, 5, ch. 91-429; s. 25, ch. 95-146; s. 290, ch. 97-103; s. 75, ch. 97-237; ss. 215, 283, ch. 98-166; s. 66, ch. 2000-158; s. 13, ch. 2006-139; s. 92, ch. 2008-6.



**CHAPTER 64E-3  
RADIOLOGIC TECHNOLOGY**

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**64E-3.001 Fees.**

The following fees are prescribed by the department:

- (1) The fee for initial application and a study guide for certification by examination as provided in Section 468.304, Florida Statutes, is 75 dollars plus the actual charge by the testing organization for the examination.
- (2) The fee for initial application without a study guide for certification by examination as provided in Section 468.304, Florida Statutes, is 50 dollars plus the actual charge by the testing organization for the examination.
- (3) The fee for initial application for certification by endorsement as provided in Section 468.3065, Florida Statutes, is 45 dollars.
- (4) The fee for subsequent examinations as provided in Section 468.306(4), Florida Statutes, is 35 dollars plus the actual charge by the testing organization for the examination.
- (5) The fee for renewal provided in Section 468.309(1), Florida Statutes, is 55 dollars for one certification category and 40 dollars for each additional certification category. The department will prorate the renewal fee for certificates expiring December 31, 1999 and December 31, 2000 to establish certificate expiration dates coinciding with the last day of the birth month of the certificateholder.
- (6) The fee for application for change from active to inactive status as provided in Section 468.3095, Florida Statutes, is 40 dollars.
- (7) The fee for late renewal as provided in Section 468.3095, Florida Statutes, is 100 dollars.
- (8) The fee for each duplicate certificate is 10 dollars.
- (9) The fee for listings and mailing labels of radiologic technologists, is \$0.05 for each name and \$55.00 for each setup.
- (10) For a study guide as provided in Section 468.304(4), Florida Statutes, 25 dollars.

*Specific Authority 468.303, 468.3065, 468.309 FS. Law Implemented 119.07(1)(b), 455.587(6), 468.304, 468.306, 468.3065, 468.309, 468.3095 FS. History—New 10-1-84, Formerly 10D-74.40, Amended 3-21-88, 9-17-92, 11-6-94, Formerly 10D-74.040, Amended 10-28-99.*

**64E-3.002 Definitions.**

- (1) “Approved educational or training program” means a program which is recognized and accepted by the American Registry of Radiologic Technologists or the Nuclear Medicine Technology Certification Board.
- (2) “General diagnostic radiographic and general fluoroscopic equipment” means any medical diagnostic X-ray system except computed tomography systems which, by design, is not limited to examinations of specific anatomical regions.
- (3) “General diagnostic radiographic and general fluoroscopic procedures” means those procedures other than angiography, arteriography, tomography, computed tomography, mobile imaging, portable imaging, digital vascular imaging, bronchography, fistulography, sialography, mammography, arthrography, lymphangiography, splenography, cholangiography, procedures which

involve the use of contrast, special procedures for the reproductive system, and those procedures performed in an operating room.

(4) “Physical presence” means within the facility housing the equipment used by a basic X-ray machine operator.

(5) “Positioning” means the correct placement of the human body part to the image detector or radiation source, and the correct alignment of the radiation equipment to the landmarks of the body, and the major anatomical structures.

(6) “Rule” means Chapter 64E-3, F.A.C.

(7) “Technique” means the equipment setting and procedure protocol used to produce a diagnostic image or to accomplish the desired results.

(8) “Walk-in emergency center” means a facility which holds itself out to the public through published advertising as a walk-in emergency center, emergi-center, urgi-center, or walk-in center; indicates to the public that the facility is open to the public primarily for the purpose of providing emergency medical care; or any facility which uses any other title, designation or advertising indicating the same; and is not licensed under Chapter 395 or 641, F.S., or rules adopted thereunder.

(9) “Practice of radiologic technology” means the performance of activities requiring special knowledge and skills, including positioning, technique, safe operation of radiation equipment and radiation protection.

(10) “HIV/AIDS” means human immunodeficiency virus and acquired immune deficiency syndrome.

(11) “Assist with managing patients undergoing radiation therapy treatments” or “assist with radiation therapy technology duties” as specified in Section 468.302(3)(d), F.S., means performing radiation therapy tasks in which the general radiographer has been trained according to the program specified in paragraph 64E-3.0031(1)(b), F.A.C., and excluding those tasks prohibited in subsection 64E-3.0031(2), F.A.C. All assistance provided by a general radiographer must be physically checked and verified by the radiation therapy technologist before delivery of each treatment fraction.

(12) “Brachytherapy” means a method of radiation therapy in which sources of radioactive material are used to deliver radiation dose by surface, intracavitary, or interstitial application and excludes teletherapy.

(13) “Duties of a medical physicist” as specified in Section 468.302(3)(d), F.S., includes:

(a) Radiation beam calibration and characterization.

(b) Quality assurance, including dose rate verification; coincidence of light field to radiation beam; rotation; laser positioning; and operation of all interlocks, collision safety systems, optical distance indicators, and emergency switches.

(c) Instrument and device specification, acceptance testing, and commissioning.

(d) Image quality assessment and optimization of imaging systems and processes.

(e) Shielding design and protection analysis on radiation-emitting equipment and radiopharmaceuticals.

(f) Consultation and treatment planning with radiation oncologist to determine dose to be delivered.

(g) Consultation with radiation oncologist to assure accurate radiation dose to a specific patient.

(h) Informing radiation oncologist when critical structures appear to be reaching tolerance doses.

(i) Determination of dose delivered to patients.

(14) “Treatment planning” as specified in Section 468.302(3)(d), F.S., means the process by which the quantity and type of radiation to be delivered to the patient and the method of delivery are prescribed, characterized, modeled, shaped, verified, and documented to maximize the dose to the tumor volume while minimizing the dose to surrounding healthy tissue. Treatment planning includes determination of the need for and type of beam modifying devices; consultation with radiation oncologist, medical physicist, or dosimetrist to determine optimum fields to cover volume of interest; and determination of the accuracy of the proposed isodose plan and treatment prescription.

*Specific Authority 468.303 FS. Law Implemented 381.0034, 468.302(3)(a), (b), 468.303, 468.304 FS. History—New 4-10-85, Formerly 10D-74.42, Amended 3-21-88, 9-17-92, 5-7-96, Formerly 10D-74.042, Amended 7-16-02, 3-4-08.*

### **64E-3.003 Qualifications for Examination.**

(1) An applicant for certification as a Basic X-ray Machine Operator or Basic X-ray Machine Operator – Podiatric Medicine shall submit an application to the department on Form DH 1006, 10/09, “Application for Basic X-ray Machine Operator or Basic X-ray Machine Operator – Podiatric Medicine,” incorporated herein by reference. Applicants for all other types of certification under this Chapter shall submit an application to the department on Form DH 1005, 10/09, “Application for General Radiographer, Nuclear Medicine Technologist, Radiation Therapy Technologist, or Radiologist Assistant,” incorporated herein by reference. All applicants must meet the qualifications prescribed by Section 468.304, F.S.

(a) An applicant for the General Radiographer, Nuclear Medicine Technologist, Radiation Therapy Technologist or Radiologist Assistant examination must have graduated from an approved educational or training program, as defined in subsection 64E-3.002(1), F.A.C., in the requested category of certification. Verification of graduation, such as a legible copy of an official transcript showing all courses successfully completed, or a copy of a diploma, must be provided with the application. A letter from the program director attesting to the applicant’s successful completion of all program requirements will also be accepted. All graduation verification documents must include the applicant’s full name, type of program, and date of graduation. If the verification documents are illegible or have been altered, the applicant must submit an original certified transcript from the applicant’s program.

(b) If an applicant cannot meet the requirement for graduation from an approved educational or training program solely because their radiologic technology education was received in a country other than the United States (U.S.), beyond the reach of U.S. accreditation mechanisms, the applicant may instead submit evidence that the radiologic technology education they received in the other country was substantially equivalent to the approved educational or training program required by the department. The department will determine, based on this evidence, whether the applicant’s education is substantially equivalent. Such evidence must include:

1. A license or registration in the applicant’s name to practice radiologic technology in the other country;
2. An official transcript of the applicant’s radiologic technology education in the other country, showing all courses successfully completed, the grade received, the applicant’s full name, the graduation date, and the degree awarded; and
3. A comprehensive, course-by-course evaluation of the U.S. equivalency of the applicant’s radiologic technology education by an international credential evaluation service which is a member of the National Association of Credentials Evaluations Services, at WWW.NACES.ORG.

(c) Documents in a language other than English must be accompanied by a certified translation in the English language.

(d) An applicant for the basic x-ray machine operator examination is not required to provide verification of graduation from an approved educational or training program. The course of study for such an applicant is review of the text and workbook entitled, “Radiography Essentials for Limited Practice,” 2nd edition, published by Elsevier Saunders, or any substantially equivalent course which provides instruction on all of the subjects listed in the American Registry of Radiologic Technologists “Content Specifications for the Examination for the Limited Scope of Practice in Radiography, 01/06”, incorporated herein by reference.

(2) An applicant who has committed a criminal offense, as described in Section 468.304(4), F.S., shall also submit:

(a) A completed Form DH 4127, 10/07, “Background History Report Form” incorporated herein by reference, for each offense, and

(b) For all offenses committed in Florida, a state criminal history record check obtained by the applicant from the Florida Department of Law Enforcement, at P.O. Box 1489, Tallahassee, FL 32302, or WWW.FDLE.STATE.FL.US, and

(c) For all offenses committed in a jurisdiction outside Florida, a criminal history record check obtained by the applicant from the agency in the jurisdiction having responsibility for criminal history records checks.

(3) An applicant who has been subject to final disciplinary action, as described in Section 468.304(5), F.S., must submit Form DH 4128, 10/07, “License Verification Form” incorporated herein by reference, to each agency which administered discipline, and supply the department with a written explanation of each violation.

(4) All documents incorporated herein may be obtained from the department at 4052 Bald Cypress Way, Bin #C85, Tallahassee, FL, 32399-3252, or WWW.DOH.STATE.FL.US/MQA/RAD-TECH.

(5) The HIV/AIDS course required of all applicants by Section 381.0034(3), F.S., shall be at least 4 hours duration and contain instruction on:

- (a) The modes of transmission, infection control procedures, clinical management, and prevention of HIV/AIDS; and
- (b) Current Florida law on HIV/AIDS and its impact on testing, confidentiality of test results, and treatment of patients.

*Rulemaking Authority 381.0034, 468.303 FS. Law Implemented 381.0034, 468.304 FS. History—New 4-10-85, Formerly 10D-74.43, Amended 3-*

**64E-3.0031 Radiation Therapy Assistance by General Radiographers.**

(1) Before assisting with managing patients undergoing radiation therapy treatments or assisting with radiation therapy technology duties as specified in Section 468.302(3)(d), Florida Statutes, a general radiographer must submit the following documents to the department:

(a) An oath or affirmation stating their desire to assist with managing patients undergoing radiation therapy treatments and containing:

1. Their full name, birth date, general radiographer certificate number, mailing address, and phone number.
2. The full name, Florida certificate number, and ARRT registration number of the radiation therapy technologist who the general radiographer will assist.
3. The full name and Florida license number of the physician who will provide general supervision of the general radiographer.

(b) Proof of successful completion of a training program as specified in the Therapy Assistance by General Radiographer Training Program Curriculum dated March 21, 2002, which is herein incorporated by reference and available from the department, of at least 560 clock hours at a radiation therapy school accredited by the Joint Review Committee on Education in Radiologic Technology.

(2) In addition to the services specifically prohibited in Section 468.302(3)(d), Florida Statutes, the following functions cannot be delegated by the radiation therapy technologist or performed by the general radiographer because they reasonably could be expected to create an unnecessary danger to a patient's life, health, or safety:

- (a) Determination and recording of factors used to calculate monitor units and exposure times.
- (b) Calculation of the number of monitor units or exposure times for each prescribed treatment session.
- (c) Positioning patients on treatment couch to reproduce set-ups indicated in treatment charts, using positioning aids, field markings, bolus, and immobilization devices.
- (d) Positioning treatment machine and accessory equipment to reproduce set-ups indicated by approved treatment plans.
- (e) Using wedges, shielding blocks, or compensators according to treatment plans.
- (f) Delivering treatment by setting and activating controls on machine console.
- (g) Having sole responsibility to monitor patient visually and by intercommunication systems during treatment.
- (h) Having sole responsibility to monitor treatment machine console during treatment and to report malfunctions.
- (i) Verifying treatment fields by taking portal films.
- (j) Reviewing portal films with radiation oncologists for approval or field modifications and initiating field changes as indicated.
- (k) Documenting changes in prescribed course of treatment.
- (l) Documenting treatment dose in patient charts.
- (m) Performing or assisting with the performance of brachytherapy.

*Specific Authority 468.303 FS. Law Implemented 468.302(3)(d) FS. History—New 7-16-02.*

**64E-3.0032 Radiologist Assistant Duties and Supervision.**

(1) The duties that a radiologist assistant may perform, and the level of supervision which must be provided by the supervising radiologist, are specified in the "Radiologist Assistant Role Delineation – January 2005," which is herein incorporated by reference, except that:

(a) With regard to Clinical Activity #23, the radiologist assistant shall not administer radiopharmaceuticals unless the assistant is also currently certified by the department as a Nuclear Medicine Technologist.

(b) With regard to Clinical Activity #24, the radiologist assistant shall only administer medications orally while under the direct supervision of the radiologist.

(c) With regard to Clinical Activity #25, the radiologist assistant shall only monitor the patient for side effects or complications of a pharmaceutical while under the direct supervision of the radiologist.

(d) With regard to Clinical Activity #27f, the radiologist assistant shall only perform PICC (peripherally inserted central catheter) placement while under the direct supervision of the radiologist.

(e) With regard to Clinical Activity #28, the radiologist assistant may only perform those additional procedures authorized in compliance with the Radiologist Assistant Role Delineation; however, a radiologist assistant is prohibited from performing the duties specified in Section 468.302(3)(h)2., F.S.

(2) Within 30 days of beginning work, a radiologist assistant must submit to the department a written statement from the supervising radiologist indicating the radiologist is supervising the assistant. This written statement must also contain:

- (a) The date the supervisory relationship began;
- (b) The full name and Florida certification number of the radiologist assistant;
- (c) The full name and Florida license number of the supervising radiologist, and;
- (d) The signatures of the supervising radiologist and radiologist assistant.

Within 30 days of the termination of the supervisory relationship between the radiologist and the radiologist assistant, the radiologist assistant must submit a written statement to the department indicating the termination date of the supervisory relationship.

*Specific Authority 468.302(3)(h), 468.303 FS. Law Implemented 468.302(1), (3)(h), FS. History–New 5-14-07.*

#### **64E-3.0033 Positron Emission Tomography-Computed Tomography (PET-CT) by Nuclear Medicine Technologists.**

(1) “Device-specific training,” as specified in Section 468.302(3)(g)1.b., F.S., means a training course supplied or taught by a PET-CT device manufacturer, or a course approved by the department as continuing education for radiologic technologists. Such a course shall be at least 16 hours in duration and cover the following subjects concerning PET and CT: PET-CT theory and physics; radiation safety; equipment operation; image formation, reconstruction and evaluation; and quality control and assurance.

(2) A Nuclear Medicine Technologist who has completed device-specific training shall maintain proof of such training at their place of practice and provide it to the department upon request. Such proof shall, at a minimum, consist of a course completion certificate bearing the date of course completion, the title of the course, the technologist’s full name, the name of the company providing the training, and the instructor’s full name.

(3) A Nuclear Medicine Technologist who is certified in Computed Tomography by the American Registry of Radiologic Technologists is hereby deemed to have met the requirement for device-specific training. Proof of such completion shall be a current American Registry of Radiologic Technologist’s wallet card bearing the technologist’s name and the credential of the Computed Tomography certification.

*Specific Authority 468.303 FS. Law Implemented 468.302(3)(g) FS. History–New 3-4-08.*

#### **64E-3.004 Practice of Radiologic Technology by Applicants for Certification by Examination.**

(1) No applicant for certification by examination shall be permitted to practice radiologic technology unless:

- (a) The applicant has submitted the required application and fee to the Department, and
- (b) The applicant has received temporary certification.

(2) An applicant who fails the first, or any subsequent examination, shall not practice radiologic technology until such time as the applicant passes a radiologic technology certification examination.

(3) Any applicant who fails to appear for the first examination for which eligible shall not practice radiologic technology until such time as the applicant passes a subsequent certification examination.

*Specific Authority 468.303 FS. Law Implemented 468.303, 468.305, 468.306, 468.307(2) FS. History–New 4-10-85, Formerly 10D-74.44, Amended 5-7-96, 12-12-96, Formerly 10D-74.044.*

#### **64E-3.005 Written Examinations.**

All applicants for certification by examination shall pass the appropriate State of Florida examination in the certification category applied for before a certificate can be issued. The passing score shall be a 75 scaled score for all examinations except that of the basic X-ray machine operator examination which shall have a passing score of 65 percent.

*Specific Authority 468.303 FS. Law Implemented 468.303, 468.306 FS. History–New 4-10-85, Formerly 10D-74.45, Amended 3-21-88, Formerly 10D-74.045, Amended 8-10-98.*

### **64E-3.006 Certification by Endorsement.**

(1) An applicant seeking certification by endorsement shall submit an application to the department as specified in Rule 64E-3.003, F.A.C., and pay the required fee.

(2) The provisions of subsection 64E-3.003(2), (3) and (5), F.A.C., must be satisfied.

(3) To apply for endorsement pursuant to Section 468.3065, F.S., an applicant shall meet all requirements for eligibility to take the certification examination given by the department, and shall have successfully completed the examination of the American Registry of Radiologic Technologists with a scaled score of 75, or a state, regional, or national examination which is equivalent to the State of Florida examination. Such examination must meet the following standards:

(a) The examination is developed using accepted psychometric procedures;

(b) The content and passing score of the examination are equivalent to that of the examination of the State of Florida.

(c) The security of the examination is maintained.

(d) The examination is revised periodically to ensure the content is current.

*Rulemaking Authority 468.303 FS. Law Implemented 468.303, 468.304, 468.3065 FS. History—New 4-10-85, Formerly 10D-74.47, Amended 3-21-88, 5-7-96, 12-12-96, Formerly 10D-74.047, Amended 3-4-08, 2-18-10.*

### **64E-3.007 Bone Densitometry.**

All active certificateholders except basic x-ray machine operators-podiatry, nuclear medicine technologists and radiation therapy technologists may perform bone densitometry procedures with dedicated bone densitometers which use machine-produced radiation after completing a device-specific training program. All active radiation therapy technologists and nuclear medicine technologists may perform bone densitometry procedures with dedicated bone densitometers which use radioactive material after completing a device-specific training program.

*Specific Authority 468.303 FS. Law Implemented 468.302(3)(d), (g) FS. History—New 9-17-92, Formerly 10D-74.0471, Amended 3-4-08.*

### **64E-3.008 Continuing Education Requirements.**

(1) Twelve contact hours of continuing education shall be required for renewal during each biennium for persons holding one or more certificates issued pursuant to Part IV Chapter 468, F.S. Credit will not be approved for repeating a course during a biennium. Repeating a course includes taking the same subject matter approved under a different course approval number, or taking the same subject matter in a different format such as live lecture or self study. Self study formats include: online, DVD, CD, videotape, audiotape, or written text.

(2) Failure to comply with the continuing education requirement shall prohibit certification renewal and result in the certificate being placed on expired status. A certificate may be reactivated in accordance with the provisions of Rule 64E-3.010, F.A.C., only upon completion of the continuing education requirement. Hours earned to complete the continuing education requirement to reactivate an expired or inactive certificate may not be used toward completion of the continuing education requirement for the next biennium.

(3) A certificateholder may be awarded twelve contact hours of continuing education for successfully passing a post-primary examination of the American Registry of Radiologic Technologists, or of the Nuclear Medicine Technologist Certification Board, during the certificateholder's current renewal cycle. To receive credit, the certificateholder must submit to the department proof of passing the post-primary examination, such as a letter from the registry or board which bears the certificateholder's name, the date the examination was taken, and the score. Credit will not be awarded for passing an examination during a previous renewal cycle.

(4) A certificateholder can be awarded contact hours for successfully completing, during the biennium, a continuing education course that is approved by an organization which is recognized by the American Registry of Radiologic Technologists as a Recognized Continuing Education Evaluation Mechanism (RCEEM). The amount of hours awarded the certificateholder shall be equal to the number of hours approved by the RCEEM for that course.

(5) Proof of attendance shall be submitted to the department as outlined in Rule 64E-3.009, Florida Administrative Code.

*Specific Authority 468.303, 468.309(1), (2), (3), 468.3095(2) FS. Law Implemented 468.309, 468.3095 FS. History—New 4-10-85, Formerly 10D-74.51, Amended 3-21-88, 9-17-92, 5-7-96, Formerly 10D-74.051, Amended 10-28-99, 3-4-08.*

**64E-3.009 Standards for Continuing Education Courses.**

(1) Objectives of each continuing education course shall describe expected learner outcomes in behavioral terms, shall be able to be evaluated, shall be attainable, and shall be relevant to current radiologic technology practice.

(2) The content of each continuing education course shall be planned in logical order and reflect input from qualified persons in the subject matter. Appropriate subject matter for continuing education courses shall reflect the professional educational needs for the learner to meet the health care needs of the consumer and consist of content from one or more of the following:

(a) Radiologic technology practice areas, such as:

1. Digital Radiography,
2. Operation of diagnostic and therapeutic equipment,
3. Radiographic positioning,
4. Film processing,
5. Shielding and collimation,
6. Computed tomography,
7. Linear accelerators,
8. Radiographic screens,
9. Phototiming,
10. Portable radiography,
11. Contrast media studies,
12. Implant therapy,
13. Ultrasound,
14. Magnetic resonance imaging,
15. Angiography,
16. Cardiac catheterization;

(b) Biological or physical sciences, such as radiation physics or radiation biology;

(c) Management or administration of radiologic health care personnel, such as radiation protection and safety and dosimetry; or

(d) Personal development subject matter, which must include application of content as it relates to improved patient care. A maximum of 3 continuing education hours in this area can be used for renewal requirements during each renewal cycle. The program may cover any topic which enhances technologist 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. Attendance at the entire course is required for credit.

(3) Learning experiences and teaching methods must be appropriate to achieve the objectives.

(4) Time allotted for each activity must be sufficient for the learner to meet the objectives.

(5) Principles of adult education must be used in determining teaching strategies and learning activities.

(6) Participants must be given an opportunity to evaluate learning experiences, instructional methods, facilities and resources used for the course.

(7) All courses shall be at least 50 minutes in length. A 50 minute course approved by the department will be awarded one contact hour of continuing education credit. An additional one-half contact hour of continuing education credit will be awarded for each additional 25 minutes of course length. Time utilized to complete the course post-test shall not be considered part of the learning activity and shall not be awarded credit.

(8) Programs shall have a stated, long term, coordinated plan for providing continuing education courses based on data related to specific characteristics of its learner population, including learner needs and methods of assessing these needs. There shall be a tangible plan for ongoing evaluation of the program content, faculty, learning process and evaluation tools. Evaluation data will be analyzed and the conclusions used in program planning, design, and continuity.

(9) A provider seeking approval of a course shall:

(a) Make application on Form DH 374, 10/07, "CE Provider Information Sheet" provided by the department and incorporated herein by reference, at least 30 days prior to the date the course begins and provide a detailed course outline and a description of course objectives. The provider will identify the format of the course as either live lecture or some type of self-study. If the course is self-study, the provider will also submit a copy of the self-study course material and post-test for review.

- (b) Notify the department of any changes of the contact persons.
- (c) Determine criteria for successful completion of the course and make this information available to participants before the course.
- (d) Provide a resume or curriculum vitae for each course instructor which demonstrates that the instructor for the course is qualified through education and experience in the subjects to be presented.
- (e) Designate a person responsible for continuing education courses for radiologic technologists.
- (f) Identify a target audience for each course.
- (g) Document the course is current and accurate by references or bibliography.
- (h) Establish written policies and procedures to implement the continuing education program.
- (i) Maintain records of individual course information for 3 years.
- (j) Send to the department a roster of participants no later than 30 days following each course on Form DH 406, 07/06 “Continuing Education Roster”, provided by the department and incorporated herein by reference. Providers shall maintain security of attendance records.
- (k) Furnish each participant with a written certificate of course completion, to include:
  1. Date of course completion;
  2. Signature and name of provider;
  3. Approved Florida provider number;
  4. Course title;
  5. Number of continuing education hours awarded;
  6. Name of participant; and
  7. Approved Florida course number.
- (10) Approval of a course can be granted for up to 36 months.
- (11) All self study 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.

*Specific Authority 468.303, 468.309(1) FS. Law Implemented 468.303, 468.309(1) FS. History–New 4-10-85, Formerly 10D-74.52, Amended 9-17-92, 5-7-96, 12-12-96, Formerly 10D-74.052, Amended 3-4-08.*

**64E-3.010 Reactivation of Inactive Certificates.**

- (1) The continuing education requirements to reactivate an inactive certificate are:
  - (a) If the certificate has been inactive for less than two years, 12 continuing education contact hours shall be accrued.
  - (b) If the certificate has been inactive for more than two years, 3 continuing education contact hours shall be accrued for each 6 months the certificate has been inactive.
  - (c) Continuing education hours used to reactivate a certificate must be accrued during the 24 months prior to reactivation and must be in addition to continuing education hours used for renewal of the certificate.
- (2) A certificateholder who has previously paid the inactive fee may reactivate his certificate by request to the Department, payment of the renewal fee, and verification that he has met the provisions of subsection 64E-3.010(1), Florida Administrative Code.
- (3) A certificateholder who has not previously paid the inactive fee may reactivate his certificate by request to the Department, payment of the renewal fee and the late renewal fee, and verification that he has met the provisions of subsection 64E-3.010(1), Florida Administrative Code.

*Specific Authority 468.303, 468.309(1), 468.3095 FS. Law Implemented 468.303, 468.309(1), 468.3095 FS. History–New 4-10-85, Formerly 10D-74.55, 10D-74.055.*



**64E-3.011 Disciplinary Guidelines.**

(1) When the Department finds that an applicant, employer, certificateholder or other person has committed any of the acts set forth in Section 468.3101, F.S., or has failed to comply with Section 381.0034, F.S., it shall impose appropriate penalties as recommended within the range of the disciplinary guidelines, considering that the following identification of offenses is descriptive only. Consult the full language contained in the statutes to assure comprehensive understanding of the violation. All violations are sufficient for refusal to certify an applicant. The guidelines shall be interpreted as inclusive of those penalties that fall between the minimum and the maximum authorized for the violation. When a guideline includes a period of probation, the intent is to require performance under supervision, additional education, treatment, and/or monitoring during the probationary period. The disciplinary guidelines are based upon a single count violation of each provision listed. Multiple count violations of a provision, or violations of multiple provisions will be grounds for enhancement of penalties. "PRN" refers to Professional's Resource Network, the impaired practitioner program for applicants and certificateholders under this part.

(a) Section 468.3101(1)(a), F.S.: Attempting to procure a certificate to practice radiologic technology by bribery, by fraudulent misrepresentation, or through an error of the Department.

Bribery or fraudulent misrepresentation.

	MINIMUM	MAXIMUM
FIRST OFFENSE	\$500 fine and one year suspension.	\$1,000 fine and revocation.
SECOND OFFENSE	\$1,000 fine and revocation.	\$1,000 fine and revocation.

Department error.

	MINIMUM	MAXIMUM
FIRST OFFENSE	\$250 fine and one year probation with conditions.	\$500 fine and revocation.
SECOND OFFENSE	\$500 fine and one year suspension.	\$1,000 fine and revocation.

(b) Section 468.3101(1)(b), F.S.: Having a certificate to practice acted against by another organization or jurisdiction.

	MINIMUM	MAXIMUM
FIRST OFFENSE	Action consistent with the disciplinary guidelines for the offense had it initially come before the Department prior to the action that was taken elsewhere with strong consideration of the penalty that was actually imposed by the other organization or jurisdiction.	Suspension of the certificate until the discipline by the other organization or jurisdiction is satisfied.
SECOND OFFENSE	Suspension of the certificate until the discipline by the other organization or jurisdiction is satisfied.	\$1,000 fine and revocation.

(c) Section 468.3101(1)(c), F.S.: Being convicted or found guilty of a crime that directly relates to the practice or the ability to practice radiologic technology or the duties of a radiologist assistant.

	MINIMUM	MAXIMUM
FIRST OFFENSE	\$200 fine and one year of probation with conditions.	\$1,000 fine and revocation.
SECOND OFFENSE	\$350 fine and one year suspension followed by three years of probation with conditions.	\$1,000 fine and revocation.

(d) Section 468.3101(1)(d), F.S.: Being convicted or found guilty of a crime against a person.

	MINIMUM	MAXIMUM
FIRST OFFENSE	\$200 fine and one year of probation with conditions.	\$1,000 fine and revocation.
SECOND OFFENSE	\$350 fine and one year suspension followed by three years of probation with conditions.	\$1,000 fine and revocation.

(e) Section 468.3101(1)(e), F.S.: Knowingly filing a false report or record or negligently failing to file a report required by law, or willfully impeding such filing.  
Negligent filing or failure to file report.

	MINIMUM	MAXIMUM
FIRST OFFENSE	\$250 fine.	\$500 fine and three years of probation with conditions.
SECOND OFFENSE	\$500 fine and one year of probation with conditions.	\$1,000 fine and one year suspension followed by three years of probation with conditions.

Willful filing or inducing the filing of a false report or obstructing or impeding the filing.

	MINIMUM	MAXIMUM
FIRST OFFENSE	\$500 fine and a reprimand.	\$1,000 fine and revocation.
SECOND OFFENSE	\$750 fine and one year suspension followed by two years of probation with conditions.	\$1,000 fine and revocation.

(f) Section 468.3101(1)(f), F.S.: Engaging in unprofessional conduct.  
Unprofessional conduct includes, but is not limited to:

1. Administering radiation or otherwise practicing radiologic technology or the duties of a radiologist assistant in a negligent manner, either by omission or commission;
2. Administering radiation without authorization from a licensed practitioner.
3. Misappropriating supplies, equipment or drugs;
4. Leaving a radiologic technology assignment before properly advising appropriate personnel;
5. Violating the confidentiality of information concerning a patient;
6. Discriminating on the basis of race, creed, religion, sex, age or national origin, in the rendering of radiologic technology or radiologist assistant services as it relates to human rights and dignity of the individuals;
7. Engaging in fraud, misrepresentation, or deceit in taking the certification examination;
8. Aiding and abetting the practice of radiologic technology or the duties of a radiologist assistant by any person not so certified;
9. Practicing without a clear and active certificate;
10. Impersonating any applicant or acting as proxy for the applicant in any examination required for the issuance of a certificate;
11. Impersonating another certificateholder or permitting another person to use his or her certificate; and
12. Any behavior defined as unprofessional or unethical by a national registry, board, or other jurisdiction which licenses, certifies or registers radiologic technologists or radiologist assistants.

	MINIMUM	MAXIMUM
FIRST OFFENSE	\$250 fine and a reprimand.	\$1,000 fine and revocation.
SECOND OFFENSE	\$500 fine and two years of probation with conditions.	\$1,000 fine and revocation.

13. Engaging or attempting to engage in sexual misconduct, as defined in Section 456.063(1), F.S.

	MINIMUM	MAXIMUM
FIRST OFFENSE	\$250 fine, three years of probation with conditions, evaluation, and appropriate treatment and monitoring.	\$1,000 fine and revocation.
SECOND OFFENSE	\$1,000 fine and revocation.	\$1,000 fine and revocation.

(g) Section 468.3101(1)(g), F.S.: Being unable to practice radiologic technology or the duties of a radiologist assistant with reasonable skill and safety to patients.

	MINIMUM	MAXIMUM
FIRST OFFENSE	\$250 fine, three years of probation with conditions, evaluation by PRN, and compliance with PRN recommendations.	\$500 fine, indefinite suspension with periodic review until the subject demonstrates to the Department the ability to resume competent practice, followed by three years of probation with conditions and compliance with PRN recommendations.
SECOND OFFENSE	\$500 fine, indefinite suspension with periodic review until the subject demonstrates to the Department the ability to resume competent practice, followed by three years of probation with conditions and compliance with PRN recommendations.	\$1,000 fine and revocation.

(h) Section 468.3101(1)(h), F.S.: Failing to report any person violating Department laws, rules, or orders.

	MINIMUM	MAXIMUM
FIRST OFFENSE	\$200 fine and reprimand.	\$500 fine and three years of probation with conditions.
SECOND OFFENSE	\$300 fine and six months probation with conditions.	\$1,000 fine and one year suspension.

(i) Section 468.3101(1)(i), F.S.: Violating Chapter 468, F.S., or any law, rule, order, or subpoena of the Department. In addition to the penalty listed, the person shall comply with the law, rule, order, or subpoena.

	MINIMUM	MAXIMUM
FIRST OFFENSE	\$200 fine and a reprimand.	\$500 fine and two years of suspension followed by two years of probation with conditions.
SECOND OFFENSE	\$300 fine and one year suspension followed by two years probation with conditions.	\$1,000 fine and revocation.

(j) Section 468.3101(1)(j), F.S.: Employing an uncertified person to practice radiologic technology or the duties of a radiologist assistant.

	MINIMUM	MAXIMUM
FIRST OFFENSE	\$350 fine and one year of probation with conditions.	\$700 fine and one year suspension followed by two years of probation with conditions.
SECOND OFFENSE	\$700 fine and one year suspension with conditions.	\$1,000 fine and revocation.

(k) Section 468.3101(1)(k), F.S.: Testing positive on a preemployment or employer-required drug screen.

	MINIMUM	MAXIMUM
FIRST OFFENSE	\$250 fine, three years probation with conditions, evaluation by PRN, and compliance with PRN recommendations.	\$500 fine, indefinite suspension with periodic review until the subject demonstrates to the Department the ability to resume competent practice, followed by three years of probation with conditions and compliance with PRN recommendations.
SECOND OFFENSE	\$500 fine, indefinite suspension with periodic review until the subject demonstrates to the Department the ability to resume competent practice, followed by three years of probation with conditions and compliance with PRN recommendations.	\$1,000 fine and revocation.

(l) Section 468.3101(1)(l), F.S.: Failing to report to the Department in writing within 30 days after having a certificate to practice acted against, including being denied certification, by a national registry or other jurisdiction.

	MINIMUM	MAXIMUM
FIRST OFFENSE	\$150 fine and reprimand.	\$250 fine and one year suspension.
SECOND OFFENSE	\$300 fine and one year suspension followed by one year of probation with conditions.	\$750 fine and two years of suspension.

(m) Section 468.3101(1)(m), F.S.: Having been found guilty or pled guilty or nolo contendere, regardless of adjudication, to any Section 435.03, F.S., offense.

	MINIMUM	MAXIMUM
FIRST OFFENSE	\$250 fine and one year suspension followed by two years of probation with conditions.	\$1,000 fine and revocation.
SECOND OFFENSE	\$1,000 fine and revocation.	\$1,000 fine and revocation.

(n) Section 468.3101(1)(n), F.S.: Failing to comply with PRN recommendations.

	MINIMUM	MAXIMUM
FIRST OFFENSE	Evaluation by PRN, compliance with PRN recommendations, and indefinite suspension of license with periodic review until the person demonstrates to the Department the ability to resume competent practice followed by probation for three years with conditions.	\$1,000 fine and revocation.
SECOND OFFENSE	\$500 fine, evaluation by PRN, compliance with PRN recommendations, and indefinite suspension of license with periodic review until the person demonstrates to the Department the ability to resume competent practice followed by probation for three years with conditions.	\$1,000 fine and revocation.

THIRD OFFENSE                      \$1,000 fine and revocation.                      \$1,000 fine and revocation.

(o) Section 381.0034, F.S.: Failing to complete an HIV/AIDs course.

	MINIMUM	MAXIMUM
FIRST OFFENSE	\$150 fine and proof of course completion not to be counted for another biennial renewal.	\$250 fine, proof of course completion, a course on ethics, neither course to be counted for another biennial renewal.
SECOND OFFENSE	\$300 fine and proof of course completion not to be counted for another biennial renewal.	\$500 fine, proof of course completion, a course on ethics, neither course to be counted for another biennial renewal, and six months probation with conditions.

(p) Section 468.3101(6), F.S.: Having a continuing education course revoked or being otherwise acted against as a continuing education provider by a national registry or other jurisdiction.

	MINIMUM	MAXIMUM
FIRST OFFENSE	\$250 fine, and the same penalty imposed by the other registry or jurisdiction.	\$1,000 fine, revocation of the provider, and revocation of all approved continuing education courses.
SECOND OFFENSE	\$500 fine, and the same penalty imposed by the other registry or jurisdiction which at a minimum must include a term of suspension of the provider and his/her approved continuing education courses.	\$1,000 fine, revocation of the provider, and revocation of all approved continuing education courses.

(2) The range of disciplinary action which the Department may impose includes any and all set forth in Section 468.3101, F.S. The Department shall take various mitigating or aggravating factors into consideration in determining the appropriate disciplinary action to be imposed and shall state in the Final Order any factors used to deviate from the specified guidelines. The factors that may be considered are:

- (a) The danger to the public;
- (b) The number of repetitions of offenses;
- (c) The length of time since the date of the violation;
- (d) The length of time the certificateholder has practiced;
- (e) The actual damage, physical or otherwise, caused by the violation;
- (f) The deterrent effect of the penalty imposed;
- (g) The effect of the penalty upon the certificateholder's livelihood;
- (h) Previous disciplinary action against the applicant or certificateholder by the department, by a national organization or registry, or by the certification authority of another jurisdiction;
- (i) Rehabilitation efforts or efforts to correct or stop violations, or the failure to correct or stop violations; and
- (j) Any other mitigating or aggravating circumstances.

(3) A certificateholder whose certificate has been suspended, or placed on probation, may file a petition or an application for reinstatement, whichever is appropriate, after the time of suspension, or probation has passed, which petition or application shall include documentation that all terms and conditions established at the time of suspension, or probation have been met.

*Specific Authority 381.0034, 468.303, 468.3101(4), 468.3101(6) FS. Law Implemented 381.0034, 468.303, 468.3101 FS. History—New 4-10-85, Formerly 10D-74.58, Amended 3-21-88, 9-17-92, 5-7-96, Formerly 10D-74.058, Amended 5-14-07.*



## **ATTACHMENTS**



# **Radiologist Assistant Role Delineation**

## **January 2005**

### **Background**

The American Registry of Radiologic Technologists (ARRT) is developing a certification program for a new level of imaging technologist called the Radiologist Assistant (R.A.). A consensus statement developed by the American College of Radiology (ACR) and the American Society of Radiologic Technologists (ASRT) proposed that the R.A. is an advanced-level radiographer who works under the supervision of a radiologist to promote high standards of patient care by assisting radiologists in the diagnostic imaging environment. Under radiologist supervision, the R.A. performs patient assessment, patient management, and selected clinical imaging procedures. Certification as an R.A. does not qualify the R.A. to perform interpretations (preliminary, final, or otherwise) of any radiological examination.<sup>1</sup>

The R.A. will be certified and registered in radiography by ARRT and, in addition, will have met the educational, ethics, and examination standards established by ARRT for certification and registration as an R.A.

### **Role Delineation Purpose**

In order to develop certification standards, ARRT had to first identify the specific activities that define the role of the R.A. This role delineation serves as the basis upon which ARRT's R.A. certification standards will be based. Each activity has associated with it a level of radiologist supervision. The definitions of these levels of supervision (i.e., personal, direct, general) are consistent with those used by the Centers for Medicare & Medicaid Services (CMS) of the United States Department of Health and Human Services (see page 2), but may not correspond to current supervision levels established under CMS policy. The depth and range of knowledge covered on the certification examination and incorporated into the clinical competency requirements will reflect the activities and levels of supervision listed in this document.

### **Role Delineation Development**

ARRT developed a draft role delineation based upon a survey of radiologists and radiology practitioner assistants (R.P.A.s) conducted in early 2004. Radiologists were asked to rate each of 80 possible clinical activities as to whether the activity should be considered as an R.A. responsibility and, if so, under what level of radiologist supervision the activity should be performed. R.P.A.s were asked to indicate if they performed the activities and, if so, what level of supervision they received. Approximately 30% of the 1,000 radiologists contacted responded to the survey. About 56% of the R.P.A.s responded.

<sup>1</sup>ACR ASRT Joint Statement: Radiologist Assistant Roles and Responsibilities (2003)



Survey responses were reviewed by an ARRT advisory committee. The committee was composed of four radiologists, two R.A. educational program directors, two R.P.A.s, one physicist and organizational liaisons. The radiologist data was used as the primary source of information and the R.P.A. data provided further input. Some tasks were deleted based upon the data, other tasks were clarified and some were combined. Each retained activity was assigned a level of supervision based upon the survey responses. This resulted in a list of activities each with an associated level of supervision that served as a draft description of the role of an R.A.

In developing the draft, the committee followed the approach of including clinical activities that could be considered as possible R.A. responsibilities and assigning an appropriate level of supervision. It was felt that excluding activities from the document could lead to confusion as to whether activities excluded had been overlooked or just assumed to be included within the role of the R.A. The document is intended to definitively identify those activities that ARRT will include within its R.A. certification standards. To serve this purpose, ARRT felt that keeping an activity in the role delineation and revising its level of supervision would be more helpful than deleting the activity.

The draft role delineation was placed on the ARRT's web site ([www.arrt.org](http://www.arrt.org)) along with an invitation for the professional community to submit comments. The feedback received from professional organizations and individuals was presented to ARRT's advisory committee in September 2004. Revisions were made to the document based upon that input resulting in an advanced draft. Further refinements were subsequently made based upon organizational feedback. The ARRT Board of Trustees adopted this final version of the R.A. Role Delineation in January 2005.

## Conclusion

Inclusion of activities in the R.A. Role Delineation should not be interpreted as authorizing the performance of the activities by the R.A. Neither should inclusion suggest that the activities may be legally performed by an R.A. in all states nor that the activities, if performed by an R.A., are eligible for reimbursement under current CMS or private insurance regulations. Individual state, insurer, and institutional regulations should be consulted to determine the specific role allowed for an R.A. in a specific situation.

This R.A. Role Delineation should be considered as a vision of what will be created through the establishment of structured educational programs, selection of appropriately qualified and experienced radiographers, implementation of a certification mechanism, modification of existing regulations, and acceptance by the professional community. The outcome of efforts to establish a new level of imaging technologist supervised by radiologists will be enhanced access for patients to high-quality radiology services.

### Definitions of Levels of Supervision:

*Personal Supervision* means the radiologist must be in attendance in the room with the R.A. during the performance of the procedure.

*Direct Supervision* means the radiologist must be present in the office suite and immediately available to furnish assistance and direction throughout the performance of the procedure. The radiologist is not required to be present in the room when the procedure is performed.

*General Supervision* means the procedure is furnished under the radiologist's overall direction and control, but the radiologist's presence is not required during the performance of the procedure.

**Clinical Activities**

**Levels of Supervision**

1.	Review the patient's medical record to verify the appropriateness of a specific exam or procedure and report significant findings to radiologist.	General
2.	Interview patient to obtain, verify, or update medical history.	General
3.	Explain procedure to patient or significant others, including a description of risks, benefits, alternatives, and follow-up. Patient must be able to communicate with the radiologist if he/she requests or if any questions arise that cannot be appropriately answered by R.A.	General
4.	Obtain informed consent. Patient must be able to communicate with the radiologist if he/she requests or if any questions arise that cannot be appropriately answered by R.A.	General
5.	Determine if patient has followed instructions in preparation for the exam (e.g., diet, premedications).	General
6.	Assess risk factors that may contraindicate the procedure (e.g., health history, medications, pregnancy, psychological indicators, alternative medicines). (Note: Must be reviewed by radiologist.)	General
7.	Obtain and evaluate vital signs.	General
8.	Perform physical examination and analysis of data (e.g., signs and symptoms, laboratory values, and significant abnormalities) and report findings to the supervising radiologist for the following:	
	a. abdomen	General
	b. thorax, lung, and respiratory function	General
	c. cardiovascular function	General
	d. musculoskeletal (muscles, bones, and joints of extremities)	General
	e. spine	General
	f. peripheral vascular system	General
	g. neurological function	General
	h. breasts and axillae (clinical breast exam)	General
9.	Apply ECG leads and recognize life threatening abnormalities.	General
10.	Perform urinary catheterization. Catheterization can be performed by appropriately trained R.A. under general supervision. If the patient is known to have an anatomic anomaly, recent surgery in the area, etc. direct supervision would be needed.	General
11.	Perform venipuncture.	General
12.	Monitor IV for flow rate and complications in compliance with facility and regulatory rules.	General
13.	Monitor IV therapy for flow rate and complications in compliance with facility and regulatory rules.	Direct
14.	Position patient to perform required procedure, using immobilization devices and modifying technique as necessary. Application of restraints should be in compliance with departmental rules and regulations.	General
15.	Administer moderate (conscious) sedation in compliance with facility and regulatory rules.	Personal
16.	Observe and assess patient who has received moderate (conscious) sedation in compliance with facility and regulatory rules.	Direct

Clinical Activities	Levels of Supervision
17. Assess patient's vital signs and level of anxiety/pain and inform radiologist when appropriate.	General
18. Recognize and respond to medical emergencies (e.g., drug reactions, cardiac arrest, hypoglycemia) and activate emergency response systems, including notification of the radiologist.	General
19. Administer oxygen as prescribed.	General
20. Operate a fixed/mobile fluoroscopic unit.	General
21. Assure documentation of fluoroscopy time.	General
22. Explain effects and potential side effects to the patient of the pharmaceutical required for the examination.	General
23. Administer contrast agents and radiopharmaceuticals as prescribed by the radiologist.	Direct
24. Administer general medications as prescribed by the radiologist. (Note: for purposes of this document, the term medications excludes contrast media and radiopharmaceuticals.)	Medications administered parenterally always Personal and medications administered orally usually Direct.
25. Monitor patient for side effects or complications of the pharmaceutical.	General or Direct depending on medication administered
26. Perform the following fluoroscopic examinations and procedures including contrast media administration and operation of fluoroscopic unit:	
a. upper GI	Direct
b. esophagus	Direct
c. small bowel studies	Direct
d. barium enema	Direct
e. cystogram	Direct
f. t-tube cholangiogram	Direct
g. hysterosalpingogram (imaging only) (Personal by radiologist if obstetrician/gynecologist not in the room; Direct by radiologist if obstetrician/gynecologist present in room.	Personal/Direct
h. retrograde urethrogram	Direct
i. nasenteric and oroenteric feeding tube placement	Direct
j. port injection	Direct
k. fistulogram/sinogram	Direct
l. loopogram	Direct
m. swallowing study	Direct
27. Perform the following procedures including contrast media administration and needle or catheter placement:	
a. lumbar puncture under fluoroscopic guidance	Personal
b. lumbar myelogram	Personal
c. thoracic or cervical myelogram	Personal

## Clinical Activities

## Levels of Supervision

d. joint injection and aspiration	Direct
e. arthrogram (conventional, CT, and MR)	Direct
f. PICC placement ( <i>Level of supervision dependent upon complexity of examination</i> ).	Direct/General
g. non-tunneled venous central line placement	Personal
h. paracentesis with appropriate image guidance	Direct
i. thoracentesis with appropriate image guidance	Direct
j. venous catheter placement for dialysis	Personal
k. lower extremity venography	Direct
l. breast needle localization	Personal
m. ductogram (galactogram)	Personal
28. Perform additional procedures the radiologist deems appropriate.	Personal
29. Perform routine CT post-processing (e.g., 3D reconstruction, modifications to FOV, slice spacing, algorithm).	General
30. Perform specialized CT post-processing (e.g., cardiac scoring, shunt graft measurements).	General
31. Perform MR post processing data analysis: (e.g., 3D reconstructions, MIP, 3D surface rendering, volume rendering).	General
32. Evaluate images for completeness and diagnostic quality, and recommend additional images as required (general radiography, CT, and MR). (Note: Additional images only in the same modality such as additional CT cuts.)	General
33. Evaluate images for diagnostic utility and report clinical observations to the radiologist. (Note: Applies to general radiography, CT, and MR).	General
34. Review imaging procedures, make initial observations, and communicate observations only to the radiologist.	General
35. Record previously communicated initial observations of imaging procedures according to approved protocols.	General
36. Communicate radiologist's report to referring physician consistent with ACR Communication Guideline.	General
37. Provide physician-prescribed post care instructions to patients.	General
38. Perform follow-up patient evaluation and communicate findings to the radiologist.	General
39. Document procedure in appropriate record and document exceptions from established protocol or procedure.	General
40. Write patient discharge summary for review and co-signature by radiologist.	General
41. Participate in quality improvement activities within radiology practice (e.g., quality of care, patient flow, reject-repeat analysis, patient satisfaction).	General
42. Assist with data collection and review for clinical trials or other research.	General