BOARDS AND COMMISSIONS

Board of Medical Imaging and Radiation Therapy

(Amendment)

201 KAR 46:035. Practice standards, scopes of practice, and ethical standards.

RELATES TO: 311B.080

STATUTORY AUTHORITY: KRS 311B.050(2), 311B.080

CERTIFICATION STATEMENT:

NECESSITY, FUNCTION, AND CONFORMITY: KRS 311B.050(2) requires the Kentucky Board of Medical Imaging and Radiation Therapy to promulgate administrative regulations to administer and enforce KRS Chapter 311B. KRS 311B.080 requires the board to recognize and enforce national practice standards, scopes of practice, and ethical standards. This administrative regulation establishes uniform standards for the licensure of individuals who perform medical imaging and radiation therapy for diagnostic and therapeutic purposes while under the supervision of a licensed practitioner of the healing arts.

Section 1. Applicability. A licensee shall only perform medical imaging or radiation therapy for diagnostic medical imaging or therapeutic purposes while under the direct or indirect supervision as specified by a licensee's practice standards, by a licensee's scope of practice, or in the ACR-AAPM Technical Standard for the Management of the Use of Radiation in Fluoroscopic Procedures as listed in Section 3 of this administrative regulation.

Section 2. If a licensee's practice standards, a licensee's scope of practice, or the ACR-AAPM Technical Standard for the Management of the Use of Radiation in Fluoroscopic Procedures fails to specify who may provide direct or indirect supervision, a licensee shall only perform medical imaging or radiation therapy for diagnostic medical imaging or therapeutic purposes while under the direct or indirect supervision of a licensed practitioner of the healing arts.

Section 3. Practice Standards. A licensee shall perform according to practice standards of the discipline for which the licensee holds a credential, as established by the American Society of Radiologic Technologists (ASRT), the American College of Radiology (ACR), the American Association of Physicists in Medicine (AAPM), and the Society of Nuclear Medicine and Molecular Imaging (SNMMI) and incorporated by reference. These standards include the:

(1) The ASRT Practice Standards for Medical Imaging and Radiation Therapy – Radiography;

(2) Nuclear Medicine Technologist Scope of Practice and Performance Standards;

[~~(3)~~] [~~Positron Emission Tomography (PET) Technologist Scope of Practice and Performance Standards;~~]

(3)[~~(4)~~] Scope of Practice for the Nuclear Medicine Advanced Associate;

(4)[~~(5)~~] The ASRT Practice Standards for Medical Imaging and Radiation Therapy – Radiation Therapy;

(5)[~~(6)~~] The ASRT Practice Standards for Medical Imaging and Radiation Therapy – Bone Densitometry;

(6)[~~(7)~~] The ASRT Practice Standards for Medical Imaging and Radiation Therapy – Cardiac-Interventional and Vascular-Interventional Technology;

(7)[~~(8)~~] The ASRT Practice Standards for Medical Imaging and Radiation Therapy – Computed Tomography;

(8)[~~(9)~~] The ASRT Practice Standards for Medical Imaging and Radiation Therapy – Limited X-ray Machine Operator;

(9)[~~(10)~~] The ASRT Practice Standards for Medical Imaging and Radiation Therapy – Mammography;

(10)[~~(11)~~] The ASRT Practice Standards for Medical Imaging and Radiation Therapy – Radiologist Assistant;

(11)[~~(12)~~] ACR ASRT Joint-Policy Statement-Radiologist Assistant: Roles and Responsibilities;

(12)[~~(13)~~] ACR-AAPM Technical Standard for Management of the Use of Radiation in Fluoroscopic Procedures;

(13)[~~(14)~~] The American Registry of Radiologic Technologists' Code of Ethics; and

(14)[~~(15)~~] The Nuclear Medicine Technology Certification Board's Code of Ethics.

Section 4. Incorporation by Reference.

(1) The following material is incorporated by reference:

(a) "The ASRT Practice Standards for Medical Imaging and Radiation Therapy – Radiography", revised June 30[~~23~~], 2024[~~2019~~];

(b) "Nuclear Medicine Technologist Scope of Practice and Performance Standards", June 9, 2022[~~2017~~];

[~~(c)~~] [~~"Positron Emission Tomography (PET) Technologist Scope of Practice and Performance Standards", revised January 26, 2013;~~]

(c)[~~(d)~~] "Scope of Practice for the Nuclear Medicine Advanced Associate", created 2009;

(d)[~~(e)~~] "The ASRT Practice Standards for Medical Imaging and Radiation Therapy – Radiation Therapy", revised June 30[~~23~~], 2024[~~2019~~];

(e)[~~(f)~~] "The ASRT Practice Standards for Medical Imaging and Radiation Therapy – Bone Densitometry", revised June 30[~~23~~], 2024[~~2019~~];

(f)[~~(g)~~] "The ASRT Practice Standards for Medical Imaging and Radiation Therapy – Cardiac- Interventional and Vascular-Interventional Technology[]", revised June 30[~~23~~], 2024[~~2019~~];

(g)[~~(h)~~] "The ASRT Practice Standards for Medical Imaging and Radiation Therapy – Computed Tomography", revised June 30[~~23~~], 2024[~~2019~~];

(h)[~~(i)~~] "The ASRT Practice Standards for Medical Imaging and Radiation Therapy – Limited X-ray Machine Operator[]", revised June 30[~~23~~], 2024[~~2019~~];

(i)[~~(j)~~] "The ASRT Practice Standards for Medical Imaging and Radiation Therapy – Mammography", revised June 30[~~23~~], 2024[~~2019~~];

(j)[~~(k)~~] "The ASRT Practice Standards for Medical Imaging and Radiation Therapy – Radiologist Assistant[]", revised June 30[~~23~~], 2024[~~2019~~];

(k)[~~(l)~~] "ACR ASRT Joint Policy Statement-Radiologist Assistant: Roles and Responsibilities", May 2003;

(l)[~~(m)~~] "ACR-AAPM Technical Standard for Management of the Use of Radiation in Fluoroscopic Procedures", revised 2023[~~2018 (Resolution 44)~~];

(m)[~~(n)~~] "The American Registry of Radiologic Technologists' Code of Ethics", (September 1, 2023[~~2019~~]); and

(n)[~~(o)~~] "The Nuclear Medicine Technology Certification Board's Code of Ethics", (November 15, 2017).

(2) This material may be inspected, copied, or obtained, subject to applicable copyright law, at:

(a) American Society of Radiologic Technologists, 15000 Central Ave. SE Albuquerque, NM 87123-3909, https://www.asrt.org/main/standards-regulations/practice-standards/practice-standards;

(b) Society for Nuclear Medicine and Molecular Imaging, 1850 Samuel Morse Drive Reston, Virginia 20190, http://www.snmmi.org;

(c) The American Registry of Radiologic Technologists' Code of Ethics, 125 Northland Drive, Saint Paul, Minnesota 55120, https://www.arrt.org/docs/default-source/Governing-Documents/code-of-ethics.pdf?sfvrsn=10;

(d) The Nuclear Medicine Technology Certification Board, 3558 Habersham at Northlake, Building I, Tucker, Georgia 30084, https://www.nmtcb.org/policies/ethics.php; or

(e) The Board of Medical Imaging and Radiation Therapy, 2365 Harrodsburg Road, Suite A220, Lexington, Kentucky 40504, Monday through Friday, 8:00 a.m. to 4:30 p.m.

KERI LEAMY, Board Chair

APPROVED BY AGENCY: August 13, 2024

FILED WITH LRC: September 5, 2024 at 10:45 a.m.

PUBLIC HEARING AND PUBLIC COMMENT PERIOD: A public hearing on this administrative regulation shall be held on November 21, 2024 at 10:00 a.m. at 2365 Harrodsburg Rd, Suite A220, Lexington Kentucky 40504. Individuals interested in being heard at this hearing shall notify this agency in writing by five workdays prior to the hearing, of their intent to attend. If no notification of intent to attend the hearing was received by that date, the hearing may be cancelled. A transcript of the public hearing will not be made unless a written request for a transcript is made. If you do not wish to be heard at the public hearing, you may submit written comments on the proposed administrative regulation. Written comments shall be accepted through November 30, 2024. Send written notification of intent to be heard at the public hearing or written comments on the proposed administrative regulation to the contact person.

CONTACT PERSON: Elizabeth Morgan, Executive Director, 2365 Harrodsburg Rd, Suite A220, Lexington Kentucky 40504, phone 502-782-5687, fax 502-782-6495, email elizabeth.morgan@ky.gov.

REGULATORY IMPACT ANALYSIS AND TIERING STATEMENT

Contact Person: Elizabeth Morgan

(1) Provide a brief summary of:

(a) What this administrative regulation does:

This administrative regulation establishes the practice standards, scopes of practice, and ethical standards for individuals licensed by the board.

(b) The necessity of this administrative regulation:

The necessity of this regulation is to establish the practice standards, scopes of practice, and ethical standards of licensees who perform medical imaging or radiation therapy for diagnostic medical imaging or therapeutic purposes. KRS 311B.080 requires the board to recognize and enforce national practice standards, scopes of practice, and ethical standards

(c) How this administrative regulation conforms to the content of the authorizing statutes:

The regulation is in conformity as the authorizing statute giving the board the ability to promulgate regulations to carry out and enforce the provisions KRS 311B.080 which requires the board to recognize and enforce national practice standards, scopes of practice, and ethical standards. 311B.050(2) requires the Kentucky Board of Medical Imaging and Radiation Therapy to promulgate administrative regulations to administer and enforce KRS Chapter 311B.

(d) How this administrative regulation currently assists or will assist in the effective administration of the statutes:

This administrative regulation establishes the practice standards, scopes of practice, and ethical standards of licensees who perform medical imaging or radiation therapy for diagnostic medical imaging or therapeutic purposes. It assists licensees in knowing the expectations of their scope of practice.

(2) If this is an amendment to an existing administrative regulation, provide a brief summary of:

(a) How the amendment will change this existing administrative regulation:

The amendment updates the Code of Ethics for the American Registry of Radiologic Technologists and the Nuclear Medicine Technology Certification Board and updates various standards of practices to the most recent versions.

(b) The necessity of the amendment to this administrative regulation:

The amendment is necessary to ensure the licensees are held to the most up-to-date standards of practice and code of ethics in the industry.

(c) How the amendment conforms to the content of the authorizing statutes:

The regulation is in conformity as the authorizing statute gives the board the ability and requires it to promulgate regulations regarding the establishment of the standards of practice.

(d) How the amendment will assist in the effective administration of the statutes:

The amendment will assist with the board employing the same standards of practice and code of ethics that is required of every licensee in Kentucky that is required of the national credentialing agency.

(3) List the type and number of individuals, businesses, organizations, or state and local governments affected by this administrative regulation:

Approximately 300 state health care organizations and approximately 8,000 licensees.

(4) Provide an analysis of how the entities identified in question (3) will be impacted by either the implementation of this administrative regulation, if new, or by the change, if it is an amendment, including:

(a) List the actions that each of the regulated entities identified in question (3) will have to take to comply with this administrative regulation or amendment:

Licensees will be required to comply with the standards of practice and code of ethics that he or she is already required to comply with in accordance with their national certification. Required continuing education and notices for the Board related to their adoption will place licensees on notice of new standards.

(b) In complying with this administrative regulation or amendment, how much will it cost each of the entities identified in question (3):

There are no additional costs for complying with the amendment.

(c) As a result of compliance, what benefits will accrue to the entities identified in question (3):

Licensees will have most up-to-date standards of practice and code of ethics for compliance, with the intent of such to provide increased protection of the public in the form of quality healthcare.

(5) Provide an estimate of how much it will cost the administrative body to implement this administrative regulation:

(a) Initially:

No new costs will be incurred by the changes.

(b) On a continuing basis:

No continuing costs will be incurred by the changes.

(6) What is the source of the funding to be used for the implementation and enforcement of this administrative regulation:

The board’s operations are funded by fees paid by licensees and applicants.

(7) Provide an assessment of whether an increase in fees or funding will be necessary to implement this administrative regulation, if new, or by the change if it is an amendment:

No.

(8) State whether or not this administrative regulation establishes any fees or directly or indirectly increases any fees:

No.

(9) TIERING: Is tiering applied?

Tiering was not applied as the regulation is applicable to all credential holders. This regulation does not distinguish between similarly situated individuals on the basis of any factor.

FISCAL IMPACT STATEMENT

(1) Identify each state statute, federal statute, or federal regulation that requires or authorizes the action taken by the administrative regulation.

KRS 311B.050, 311B.080

(2) Identify the promulgating agency and any other affected state units, parts, or divisions:

Kentucky Board of Medical Imaging and Radiation Therapy.

(a) Estimate the following for the first year:

Expenditures: n/a

Revenues: n/a

Cost Savings: n/a

(b) How will expenditures, revenues, or cost savings differ in subsequent years?

There is no cost associated with administering this regulation.

(3) Identify affected local entities (for example: cities, counties, fire departments, school districts):

Local entities should not be affected.

(a) Estimate the following for the first year:

Expenditures: n/a

Revenues: n/a

Cost Savings: n/a

(b) How will expenditures, revenues, or cost savings differ in subsequent years?

There is no cost associated with administering this regulation.

(4) Identify additional regulated entities not listed in questions (2) or (3):

None.

(a) Estimate the following for the first year:

Expenditures: n/a

Revenues: n/a

Cost Savings: n/a

(b) How will expenditures, revenues, or cost savings differ in subsequent years?

There is no cost associated with administering this regulation.

(5) Provide a narrative to explain the:

(a) Fiscal impact of this administrative regulation:

There is no cost associated with administering this regulation.

(b) Methodology and resources used to determine the fiscal impact:

There is no cost associated with administering this regulation.

(6) Explain:

(a) Whether this administrative regulation will have an overall negative or adverse major economic impact to the entities identified in questions (2) - (4). ($500,000 or more, in aggregate)

There is no cost associated with administering this regulation.

(b) The methodology and resources used to reach this conclusion:

There is no cost associated with administering this regulation.