

BOARD OF RADIOLOGIC IMAGING AND RADIATION THERAPY

Regular Board Meeting

April 19, 2022

MINUTES

A regular board meeting of the **Board of Radiologic Imaging and Radiation Therapy** was called to order at 9:03 a.m. in the Iris Room, Ground Floor, Metro Center Complex, 665 Mainstream Drive, Nashville, Tennessee 37243 by Karen Munyon, Board Chairperson.

Members Present:	Chester Ramsey, PhD, DABR Kae Fleming, RT(R) Karen Munyon, BSRT(T) (CT) Jennifer Thompson, RT(R)(QM) Patrick Brazan, CNMT Pamela Ward, RT(R) (M)(CT)(BD)
Absent Members:	Gary Podgorski, MD
Staff Present:	Rene Saunders, Medical Consultant Francine Baca-Chavez, Board Attorney Stacy Tarr, Administrative Director Candyce Wilson, Administrative Director

Ms. Munyon conducted a roll call of the Board members to confirm attendance.

Approval of Meetings

Ms. Fleming made a motion to approve the meeting minutes from the January 18, 2022, meeting. Mr. Ramsey seconded the motion and it passed.

Office of Investigations Report

The Office of Investigations intake coordinator, Mr. Roger Knowles, introduced himself to the Board. He stated there were three (3) new complaints opened and five (5) closed complaints. He stated that two (2) were referred to the Office of General Counsel, one (1) was closed with no action, and two (2) were closed with letters of warning. He also stated that the three (3) new complaints were for lapsed license practice.

Disciplinary Coordinator/Office of General Counsel Report

Ms. Baca-Chavez stated that the disciplinary coordinator report has been combined with the Office of General Counsel report. Ms. Baca-Chavez stated that the first part of the report is about conflict of interest to remind members to recuse themselves when necessary. Ms. Baca-Chavez provided an update about the Board's rules and stated they will be effective June 6, 2022.

Ms. Baca-Chavez stated there were currently twenty- six (26) x-ray operators being monitored, twenty (20) have had their license reprimanded, one (1) on probation with terms, zero (0) suspensions, and five (5) have had their license revoked/surrendered.

Ms. Baca-Chavez stated that the Office of General Counsel report will discuss the emergency rulemaking hearing. Ms. Baca-Chavez stated the reason for this emergency rulemaking hearing is because there is concern from hospitals, outpatient centers, diagnostic centers, and other facilities not being able to have all their employees licensed by June 6, 2022. Ms. Baca-Chavez stated that previously only individuals that needed to be licensed were those working in a physician's office. Ms. Baca-Chavez stated that the concern with the proposed rules being effective June 6, 2022, could cause loss of employment for individuals in hospitals, outpatient centers, diagnostic centers, and other facilities. Ms. Baca-Chavez stated that the proposed emergency language grant applicants one-hundred and fifty (150) days to get licensed after June 6, 2022. Ms. Baca-Chavez stated this extension would allow time for background checks, license verifications or any other part of the licensure process that could take two (2) or more weeks.

Ms. Baca-Chavez stated that the emergency rulemaking process differs from the standard rulemaking process because the Board is allowed to bypass certain procedures due to imminent harm to the public. Ms. Baca-Chavez stated the imminent harm in this case would be delayed services for patients due to lack of staff. Ms. Baca-Chavez stated that the emergency rule would go into effect June 6, 2022, with the Board's rules. Ms. Baca-Chavez said the emergency rule be allowed for one hundred and eighty (180) days.

Ms. Munyon asked what would prohibit an applicant to not apply last minute. Ms. Munyon stated that she would be more comfortable allowing the application to be submitted in ninety (90) days and one hundred and fifty (150) days to practice pending the completion of the application.

Dr. Saunders explained that the applicant has the one hundred and fifty (150) days from the emergency rule's effective date to submit and complete the application. Dr. Saunders stated that if an applicant applied ten (10) days prior to the deadline they would only have ten (10) days to continue working. Dr. Saunders added the one hundred and fiftieth (150th) day the applicant would need to stop working until their application was approved. Ms. Munyon stated that she was unaware that the new application was available April 1, 2022. Ms. Fleming stated that she did not have an issue with the one hundred and fifty (150) days and has been referring individuals to the department's website to complete the appropriate application. Ms. Munyon asked the Board if there was any additional commentary. Ms. Baca-Chavez stated the department has been updating the website and sending email blasts to hospitals. Ms. Baca-Chavez asked for additional suggestions on how to further spread the information. Ms. Munyon inquired about

contacting the ARRT organization to obtain a list of individuals certified and living in Tennessee. Ms. Fleming stated that the Tennessee Hospital Association is aware of the rules effective date which would aid in more individuals being informed.

Ms. Fleming made a motion to approve the emergency rule language for the one hundred and fifty (150) days. Mr. Ramsey seconded the motion and the motion passed.

Discuss about Limited Scope Radiography Program at University of Memphis

The Board reviewed the Limited Scope Radiography program at University of Memphis. Ms. Thompson stated that she had many concerns about the letter submitted from the program. Ms. Thompson stated that the program appears to not understand the terminology for the profession. Ms. Thompson stated that the credentials listed for the person overseeing the program are not clear. Ms. Baca-Chavez stated that the approval or denial of this program cannot happen until the next Board meeting because the rules will be in effect.

Ms. Munyon explained that she would want someone from the program come to the Board meeting to answer questions about the program. Ms. Fleming asked if the Board may request the credentials of the instructors in the program. Dr. Saunders stated that an approval packet would list all credentials and requirements for the program. Ms. Baca-Chavez asked the Board if they are willing to list specific inquiries for the program to address. Dr. Saunders reiterated that the program can be approved or denied based on the rules, not any other reason. The Board wishes to see the following specific requirements within the request: credentials and CVs, location of training, people on sight providing training of the course, address the letter specifically to the fact that they are meeting the ARRT requirements, intended contact length, clinical rotation sites, indicate whether or not the student is an employee or only in training, clarification on what limited scope is and if the students will be supervised by a technologist.

Ms. Munyon made a motion for the Limited Scope Radiography Program present the Board with a revised presentation of the program and for a representative to attend the next meeting. Ms. Thompson seconded the motion and it passed.

Discussing and Considering a Policy Statement about Length of Time between Classroom Training and Clinical Training

Ms. Baca-Chavez stated that this topic is being discussed because there is not anything that specifically addresses this topic. Ms. Munyon asked about the likelihood of this circumstance. Dr. Saunders stated that most applications that have been received are from full scope applicants. Mr. Brazan stated he was hesitant to require a specific time frame. Dr. Saunders stated that the specialty of the physician signing off for the individual might not be able to fully assess the individual's competency. Ms. Baca-Chavez reiterated these are potential issues that could come before the Board soon. Ms. Munyon proposed that the Board take time to research and readdress this topic at the next board meeting.

Continuing Education Policy

Ms. Baca-Chavez explained the purpose of the policy and the ideas being proposed. An Agreed Citation was the proposed remedy for a licensee not completing the Board's Continuing Education requirements. The civil penalty would be twenty (\$20.00) dollars for each hour missed. The amount chosen for the civil penalty was transferred from the previous Continuing Education policy. The payment for the Agreed Citation should be received within ninety (90) days. The policy requires the licensee to complete the missing hours within ninety (90) days in addition to ten (10) additional hours. Ms. Baca-Chavez stated if the licensee does not adhere to this policy the licensee's information will be transferred to the Office of General Counsel. Ms. Baca-Chavez stated that would typically end with the license being formally reprimanded. Ms. Baca-Chavez stated not adhering to the policy would result in the information being reported to the National Practitioner Data Bank.

Ms. Fleming made a motion for the Board to adopt this policy. Mr. Brazan seconded the motion and it passed.

Reentry Into Practice Policy

Ms. Tarr provided the Board with the reentry to practice policy from the Physician Assistant Board. Ms. Fleming asked what would happen to those who were previously licensed and let their license expire. Ms. Fleming asked would that constitute as a remediation issue. Dr. Saunders stated if the individual provides a work history that states they have still been practicing it would not apply.

Mr. Ramsey stated that if an individual has maintained their continuing education and has an unrestricted certification, then the individual should be able to have each modality they are credentialed endorsed. Mr. Ramsey stated there was no provision nor scope for the additional clinical practice for a gap in work history.

Ms. Munyon mentioned that a temporary license could be granted until a supervising physician signs off for the licensee to prove the individual's competency. Ms. Baca-Chavez stated it would be more of a case-by-case matter. Mr. Brazan stated that it is not necessary for the Board to police whether a licensee is equally working in each modality they are certified in. In addition, Mr. Brazan stated that an individual that has been completely out of practice for two (2) years or more needs to be brought before the Board.

Ms. Tarr summarized the points by the board members by emphasizing that the Board's concern is an individual being out of practice versus equally practicing the individual's modalities. Ms. Thompson mentioned that every ten (10) years an individual would need to take an exam to show competency in that modality. Dr. Saunders stated the exam does not demonstrate or insinuate competency in the clinical setting.

Ms. Munyon stated she was in favor of an observer-ship. Dr. Saunders asked Ms. Munyon if she felt at ease for a physician that is not as knowledgeable about radiology signing off for an individual to attest to that individual's competency. Ms. Fleming stated the Board's rule outlines the observer must be an osteopathic or medical doctor. Ms. Fleming stated that there should not be a restriction based on specialty because it could be difficult rural areas.

Dr. Saunders posed a question to the Board about reviewing an application where an applicant applied for the specialty areas radiographer and radiation therapy. Dr. Saunders added that the individual has not shot an x-ray in three (3) years. Ms. Munyon stated that individual would be shooting with an accelerator with ionizing radiation, so that individual would not need to remediate. Dr. Saunders asked what if the specialty area was just mammography. Ms. Munyon reiterated that if the individual is credentialed in that specialty area they should be allowed to be licensed for their specialties.

Ms. Baca-Chavez provided the board members with the BME reentry policy and added suggestions about how the Board could proceed with the policy. Ms. Fleming asked could the Board revise the policy later in time. Ms. Baca-Chavez stated a policy could be amended later. As a recap of their discussion, the Board is leaning towards granting licensure when the applicant is credentialed in their specialty area(s) even if they have been out of practice for over two (2) years. It would not matter if they were only practicing some scopes and not all scopes. However, anyone that has been totally out of practice for over two (2) years should appear before the Board. Ms. Fleming suggested that the Board wait to draft a policy.

Financial Report

Ms. Alicia Grice introduced herself to the Board. Ms. Grice stated that the report was ran from July 1, 2021, until December 31, 2021. The total expenditures were thirteen thousand (\$13,000) dollars. Ms. Grice stated that the Board is expected to close at twenty-six thousand (\$26,000) dollars is in the red. Ms. Grice stated there was a deficit in the carry over funds it closed in Fiscal Year 2021 at three hundred thousand and seventeen (\$317,000) dollars in the red.

Ms. Munyon asked Ms. Grice if an applicant being fined would appear as a revenue item. Ms. Grice explained that currently the money would be accounted for with Board of Medical Examiners. Ms. Grice explained that the revenue that appears for this Board is from the CAREs Act which is reimbursement funding since they are not yet receiving fees. Ms. Grice stated the operating expenditure should be around ninety-six thousand (\$96,000) dollars. Ms. Grice stated that moving forward any additional money would be allocated to the carry over funds as needed.

Clinical Training Form and Letter of Notification

Ms. Munyon asked the radiologic technologist (RT) be changed to radiographer (R). Mr. Brazan stated that the form listed NMT, and the certification is CNMT. Mr. Ramsey stated the cardiovascular interventional radiography is a specialty area that can be applied for but there are no new credentials for this specialty being issued.

Ms. Tarr stated she would add radiographer (R), nuclear medical technologist (CNMT), and remove cardiovascular interventional radiography (CV). Ms. Fleming asked Ms. Tarr if the form was before or after the clinical training. Ms. Tarr explained that the form is to be submitted before the clinical training. Dr. Saunders stated that the wording should be “proposed training period”. Dr. Saunders suggested that physician be removed from the first page and just have the section labeled supervisor. Dr. Saunders stated the page could be duplicated as many times as

necessary. Dr. Saunders stated this form aids in disciplining the appropriate practitioner if there are any issues in the future.

Ms. Baca-Chavez asked if this form is apart of the application. Dr. Saunders clarified this is a letter of notification and it is not a part of the application. Ms. Tarr asked the Board if they would like to move forward with adding the supervision form, they are able to do so. Dr. Saunders suggested the supervisor form should be used for initial licensure and individuals that are going to complete clinical training. Dr. Saunders stated it is required in the rules for an individual to provide their supervisor and that is why the form was drafted.

Mr. Brazan shifted the topic by asking about removing nuclear cardiology technologist (NCT) from the application because it could pose an issue. Mr. Brazan explained that a nuclear medicine technologist can perform procedures cardiology based. Mr. Ramsey explained it is more about an individual having their license reflect that certification not a scope of practice issue. Mr. Ramsey explained his concern was with nuclear medicine technologists and PET imaging. Mr. Ramsey explained there are only forty-one (41) nuclear medicine technologists certified in PET imaging. Mr. Ramsey explained there are currently thirty-seven (37) fixed nuclear medicine technologists but one hundred (100) nuclear medicine technologists performing those procedures. Ms. Munyon explained that the form for clinical training is so individuals can earn the credential in a different specialty area.

Ms. Baca-Chavez reiterated the scope of practice as it reads in the rules. Mr. Brazan expressed concern that an individual only practicing what they are licensed in as even if their national certifying organization has a broader definition of scope of practice could cause staffing issues. Ms. Munyon asked Ms. Baca-Chavez if the wording could be changed in the rule for scope of practice. Ms. Baca-Chavez explained that the Board can interpret their rules. However, Ms. Baca-Chavez explained that a rule change would be required to change the wording of the rule.

Mr. Ramsey asked could the Board create a policy statement to how the Board would be able to interpret an issue of scope of practice. Ms. Tarr explained there could potentially be several individuals coming before the Board for an applicant interview. Ms. Tarr asked if the Board would be willing to conduct a two- day meeting. Dr. Saunders stated there could be a two-day meeting or prepare individuals to potentially be at the meeting until the meeting is complete. Ms. Munyon suggested that the Board think about it more before deciding.

Ms. Munyon directed the Board back to the supervisor form to discuss. Ms. Thompson stated that an individual preparing to attain initial certification would have their supervisor sign off on the application to apply for their certification exam. Dr. Saunders explained that information is only viewable to that specific national certifying organization and the applicant would need to provide this information. Ms. Munyon stated the supervisor information should be submitted from the applicant with their clinical training form and with their initial application. Dr. Saunders explained that for the clinical training form an individual would need a supervising physician and technologist working in that specialty area to be listed on the form. Dr. Saunders explained that for the initial application the applicant would need to provide a supervising physician and the physician signs the document.

Ms. Tarr reiterated that the clinical training option is for individuals who are currently licensed in Tennessee receiving training to add an additional specialty area. Ms. Tarr stated that proof of certification - being credentialed in the new specialty area - is needed to add that specialty area to the license.

Mr. Ramsey asked for clarification if the one hundred and fifty (150) days is just to obtain the license. Ms. Baca-Chavez stated that was correct.

Mr. Ramsey asked for clarification that a person licensed after June 6, 2022, could submit the appropriate information to start clinical training afterwards. Ms. Tarr stated that was correct and once the licensee was able to provide proof of certification in that additional specialty area, they could upgrade their license. Ms. Tarr explained that there would be a fee for the license upgrade form.

Ms. Munyon made a motion for there to be a place for both signatures to be added at the bottom of the clinical training form. Ms. Fleming seconded the motion and it passed. Ms. Fleming made a motion to amend the motion to add reference to the letter of notification. Ms. Baca-Chavez asked for clarification that number two (2) would state that prior to engaging in clinical training the licensee would need to notify the Board's administrative office by submitting the letter of notification form. Ms. Ward seconded the motion and it passed.

Dr. Saunders ask the Board members would they like to proceed with a supervisor form for initial application. Dr. Saunders explained that an applicant would need to have a supervising physician to apply for licensure, but it does not state that the applicant would need to provide the supervising physician's information. The Board discussed amongst themselves how to proceed.

Dr. Saunders expressed to the Board if the supervising information is not meaningful it may not be beneficial. Dr. Saunders explained that the applicant could be licensed without the supervising physician's information. Dr. Saunders explained that in the past the administrator would inquire about the supervising physician of the licensee and mail out a supervisor letter. Dr. Saunders stated that the letter would inform the physician they had employed a radiologic technologist that was not licensed and should have been licensed in order to provide services in that setting.

Ms. Munyon stated that the issue of providing the supervising physician's information with initial application would be tabled.

Ms. Fleming posed a question about how a licensee should display their license in their place of employment. Ms. Baca-Chavez stated that personnel file was listed in the rules. Ms. Baca-Chavez referenced TCA 63-1-109 (g) for the Board to review. This statute references that hospitals are exempt from the requirement. Ms. Munyon asked if the Board had any additional questions or comments.

Public Comment

No public attendees were present for comment.

Mr. Ramsey made a motion to adjourn the meeting. Ms. Munyon seconded the motion and it passed.

The meeting adjourned at 1:48 p.m.