TITLE 435. STATE BOARD OF MEDICAL LICENSURE AND SUPERVISION
CHAPTER 60. RADIOLOGIST ASSISTANTS

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SUBCHAPTER 1. ADMINISTRATION AND ORGANIZATION

435:60-1-1. Purpose

The rules of this Chapter have been adopted to assist in the implementation and enforcement of the Oklahoma Radiologist Assistant Licensure Act.

435:60-1-2. Interpretation of rules and regulations

If any section, sentence, clause, or phrase of this Chapter shall be held, for any reason, to be inoperative or unconstitutional, void, or invalid, the validity of the remaining portion of the rules shall not be affected thereby, it being the intention of the Oklahoma State Board of Medical Licensure and Supervision in adopting the rules that no portion or provision herein shall become inoperative or fail by reasons of the unconstitutionality or invalidity of any portion or provision, and the Oklahoma State Board of Medical Licensure and Supervision does hereby declare it would have severally passed and adopted the provisions contained in this Chapter separately and apart one from another.

435:60-1-3. Definitions

The following words and terms, when used in this Chapter, shall have the following meaning, unless the context clearly indicates otherwise:

"A.C.R." means the American College of Radiology.

"Act" means the Radiologist Assistant Licensure Act.

"A.R.R.T." means the American Registry of Radiologic Technologists.

"A.S.R.T." means the American Society of Radiologic Technologists.

"Board" means the State Board of Medical Licensure and Supervision.

"Committee" means the Radiologist Assistant Committee.

"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.

"Personal Supervision" means the radiologist must be in attendance in the room during the performance of the procedure.

"Radiologist" is a physician licensed by the State Board of Medical Licensure and Supervision or by the State Board of Osteopathic Examiners and certified by the American Board of Radiology or the American Osteopathic Board of Radiology.

"Radiologist Assistant" means an advanced-level certified radiologic technologist, licensed by the Board, who works under the direct supervision of a radiologist to enhance patient care by assisting the radiologist in the diagnostic imaging environment and shall be certified and registered with the A.R.R.T. as a Registered Radiologist Assistant and credentialed to provide radiology services and have completed a radiologist assistant program approved by the A.R.R.T. and passed the A.R.R.T. certification examinations. A radiologist assistant shall not interpret images, make diagnoses, or prescribe medications or therapies or obtain informed consent.

"Registered Radiologist Assistant" or "R.R.A." means a Radiologist Assistant registered by the American Registry of Radiological Technologists (ARRT).

"Unprofessional Conduct" includes, but is not limited to, a departure from or failure to conform to the minimal standards of acceptable and prevailing radiologist assistant practice; any radiologist assistant practice that may create unnecessary danger to a patient's life, health, or safety; or any practice that is contrary to the ethical conduct appropriate to the professional that results in the termination from employment. Actual injury to a patient or the public need not be established.

435:60-1-4. Advisory Committee on Radiologist Assistants – terms of members – removal from Committee

(a) Except as provided in the Act for the initial Committee appointments, the Radiologist Assistant Advisory Committee shall consist of seven (7) members appointed as follows:

(1) One member shall be a physician appointed by the Board from its membership;

(2) One member shall be a radiologist appointed by the Board from a list of qualified individuals submitted by the Oklahoma State Medical Association and who is not a member of the Board;

(3) One member shall be a physician appointed by the State Board of Osteopathic Examiners from its membership;

(4) One member shall be a physician appointed by the State Board of Osteopathic Examiners from a list of qualified individuals submitted by the Oklahoma Osteopathic Association and who is not a member of the State Board of Osteopathic Examiners;

(5) One member shall be a radiologist appointed by the Board from a list of qualified individuals submitted by the Oklahoma State Radiological Society and who is not a member of the Board; and

(6) Two members shall be radiologist assistants appointed by the Board from a list of radiologist assistants submitted by the Oklahoma State Radiological Society, and shall have engaged in rendering radiologist assistant services to the public, teaching, or research for at least two (2) years immediately preceding their appointments. Except for members first appointed to the Committee, these members shall at all times be holders of valid licenses as radiologist assistants in Oklahoma.

(b) Members of the Committee shall be appointed for terms of four (4) years, except for the initial committee members whose terms shall begin either on September 1, 2008, or the date of their appointment, whichever is later, and shall continue for the following periods:

(1) Two physicians and one radiologist assistant for a period of three (3) years; and

(2) Three physicians and one radiologist assistant for a period of four (4) years.

(c) Upon expiration of a member's term of office, the appointing authority for that member shall appoint a successor pursuant to the provisions of this section. Vacancies on the committee shall be filled in like manner for the balance of an expired term. No member shall serve more than three (3) consecutive terms. Each member shall serve until a successor is appointed and qualified.

(d) Upon expiration or vacancy of the term of a member, the respective nominating authority may, as appropriate, submit to the State Board of Medical Licensure and Supervision or the State Board of Osteopathic Examiners, a list of three persons qualified to serve on the Committee to fill the expired term of their respective member. Appointments may be made from these lists of the appointing Board, and additional lists may be provided by the respective organizations if requested by the State Board of Medical Licensure and Supervision.

(e) The Board may remove any member from the Committee for neglect of any duty required by law, for failure to attend at least 50% of the regularly scheduled meetings in a calendar year, for incompetency, or for unethical or dishonorable conduct.

435:60-1-5. Method of operations - Committee meetings - quorum - advise Board

(a) The Committee shall meet at least twice each year and shall elect biennially during odd-numbered years a chair and vice-chair from among its members. The Committee may convene at the request of the chair, or as the Committee may determine for such other meetings as may be deemed necessary.

(b) A majority of the members of the Committee, including either the chair or vice-chair, shall constitute a quorum at any meeting, and a majority of the required quorum shall be sufficient for the committee to take action by vote.

(c) The Committee shall advise the Board in developing policy and rules pertaining to the Radiologist Assistant Licensure Act.

SUBCHAPTER 3. APPLICATION FOR LICENSURE

435:60-3-1. License required

Effective April 1, 2009, any person who practices as radiologist assistant or holds himself/herself out to be a Licensed Radiologist Assistant or uses the title Radiologist Assistant, R.A., L.R.A., or R.R.A. must possess a valid license issued by the Board. Radiology Technologists and Technicians are not required to be licensed under this Act.

435:60-3-2. Qualifications for licensure

Applicants for licensure must:

(1) Be certified and registered as a R.R.A. with the American Registry of Radiologic Technologists and credentialed to provide radiology services;

(2) Have completed a radiologist assistant program accredited by the American Registry of Radiologic Technologists;

435:60-3-3. Application for licensure/renewal of license - procedures

(a) The Board directs staff to prepare and create new forms or modify existing forms to be used in the application process for licensure and renewal of license. Application forms shall require applicants to submit all information required by the Act.

(b) The application and forms shall be submitted to the Board accompanied by fees as set by the Board. Any incomplete or missing information, documentation or fees shall render the application incomplete. No license shall be issued unless all application requirements have been met. Incomplete applications will be considered abandoned after one year.

(c) Any applicable fees paid shall not be refunded. The applicant shall be forthright and open in the provision of information to the Board in the application process. The Board may deny a license to any applicant who does not provide the Board with complete, open and honest responses to all requests for information.

(d) A Committee member or Board member, based on any response to any question or request for information on the application form, may request an applicant to provide any additional information that the Board member feels is necessary or useful to determine the applicant's ability to practice as a radiologist assistant.

(e) The Board may require a criminal background check on all applicants for licensure. The fee shall be paid by the applicant.
(f) Fraud or misrepresentation in applying for or procuring a license or in connection with applying for or procuring renewal of a license may be grounds for denial or revocation by the Board.
(g) No person shall be licensed by the Board unless and until that person first fully complies with all licensure provisions of the Act and has satisfied the Board of the ability of that person to practice as a radiologist assistant with reasonable skill and safety.

435:60-3-4. Required documentation

(a) Applicants must submit the following:
(1) Application form and appropriate fee(s);
(2) Verification of A.R.R.T. certification and registration to provide radiology services;
(3) Verification of completion of a radiologist assistant program accredited by the
(4) A.R.R.T. to be completed by the educational organization and submitted directly to the Board;
(5) Verification of licensure from each state from which a license is currently or has been held to practice in a medically related field.
(6) Background check.

(b) Applicants who have never held an Oklahoma license and who have not practiced as a Radiologist Assistant within the previous twelve (12) months wishing to obtain a license shall be required to make a personal appearance before the Committee and practice under the personal supervision of a licensed radiologist for up to ninety (90) days with an evaluation provided to the Committee at the end of the supervised period. The Committee also may require additional continuing education units.

435:60-3-5. Authorization to practice temporarily

For the purpose of safeguarding the health, safety and welfare of the public, the Secretary of the Board may authorize the temporary practice, under the supervision of a licensed radiologist assistant, in the interim between acceptance of completed application and issuance of a license.

435:60-3-6. Licensure by endorsement

The Board may issue a license to practice as a radiologist assistant by endorsement to:
(1) Applicants for licensure by endorsement who are currently licensed to practice as a radiologist assistant under the laws of another state, territory, or country if the qualifications of the applicant are deemed by the Board to be equivalent to those required in this state;
(2) Applicants who are certified and registered with the American Registry of Radiologic Technologists as an R.R. A. and have completed a RA program accredited by the American Registry of Radiologic Technologists, provided such certification and registration are not suspended or revoked;
(3) Applicants applying for licensure by endorsement must provide a complete application as set out in OAC 435:60-3-3 and OAC 435:60-3-4. In addition, applicants must certify under oath that their credentials have not been suspended or revoked.

SUBCHAPTER 5. BIENNIAL RENEWAL

435:60-5-1. Requirements for renewal of license

(a) Licensees must renew their licenses biennially on or before March 31st.
(b) The application and fee for the renewal of the license shall be submitted, postmarked or hand delivered to the Board office no later than the expiration date. Licenses not renewed will be made inactive and the licensee may not practice.
(c) Each licensee is responsible for renewing the license on or before the required date and shall not be excused from paying additional fees or penalties.

435:60-5-2. Renewal procedure

(a) Each licensee will be required to renew in a form required by the Board. Licensees will be notified at least thirty (30) days prior to the expiration date of the process to renew and required fee.
(b) The license renewal application for all licensees shall require in addition to other information, the preferred mailing address and primary practice address.
(c) The board shall not consider a license to be renewed until it receives the completed license renewal application, the required fees set by the Board and proof of current ARRT registration.
(d) The Board shall issue a renewal of license identification card to a licensee who has met all requirements for renewal.

435:60-5-3. Late renewal

(a) The Board shall notify a person who has not renewed a license after a period of more than thirty (30) days that their license is inactive.
(b) A person whose license is inactive for not more than thirty (30) days may renew the license by paying the required renewal fee and reinstatement fee of $100, if received within thirty (30) days of the end of the renewal period.
(c) A person whose license has been lapsed more than thirty (30) days shall meet all application requirements in effect at the time reinstatement is requested. In addition, the applicant may be required to meet one or more of the following:

(1) Personal appearance before the Committee;
(2) Additional continuing education units;
(3) Practice under the personal supervision of a licensed radiologist for up to ninety (90) days with an evaluation provided to the Committee at the end of the supervised period.
(4) After a period of 12 months of continuous inactivity as a Radiologist Assistant, an applicant for reinstatement may be required to retake the test for initial licensure.

(e) A licensed radiologist assistant who does not intend to engage in the practice must notify the Board of intent not to practice.
(f) The Board will replace a lost, damaged or destroyed license certificate or license identification card upon application by the licensee and payment of fees established by the Board. Applications must include an affidavit detailing the loss or destruction of the licensee's original license or license identification card, or be accompanied by the damaged certificate or card.

435:60-5-4. Fees.

(a) **Fee schedule.**

(1) Application for initial licensure - $100.00

(2) Biennial renewal fee - $200.00

(3) Late renewal fee - $300.00

(4) Duplication or modification of license - $60.00

(b) All fees assessed by the Board shall be received prior to processing an application for licensure or renewal of licensure.

(c) All fees are non-refundable.

SUBCHAPTER 7. REGULATION OF PRACTICE

435:60-7-1. Supervision

A licensed radiologist may not be the general, direct or personal supervisor for more than two (2) radiologist assistants at any one time. A radiologist assistant working under personal supervision may assist a radiologist in any procedure for which the radiologist has full privileges and credentials.

435:60-7-2. Supervision; physician responsibility; independent care prohibited

(a) The health care services performed by a radiologist assistant shall be done under the supervision of a radiologist who retains responsibility for patient care.

(b) A radiologist assistant must function only under the supervision of a licensed and board certified radiologist. Nothing in the Radiologist Assistant Act shall be construed to permit radiologist assistants to provide health care services independent of radiologist supervision. Radiologist supervision shall be conducted in accordance with the following standards:

(1) The supervising radiologist is responsible for the formulation or approval of all orders and protocols (whether standing orders, direct orders, or any other orders or protocols) that direct the delivery of health care services, and the supervising radiologist shall periodically review such orders and protocols.

(2) The supervising radiologist regularly reviews the health care services provided by the radiologist assistant and any problems or complications encountered.

(3) The radiologist assistant is an agent of the supervising radiologist and shall not be the employer of the supervising radiologist.

(4) The supervising radiologist is available physically or through direct telecommunications for consultation, assistance with medical emergencies or patient referral.

(5) The supervising radiologist routinely is present in the facility to provide radiologic services to patients.

435:60-7-3. Health care services performed

(a) **Health care services allowed under general supervision.** A radiologist assistant may perform the following health care services under general supervision at the direction of the supervising radiologist. Such services are limited to the following, except as provided in (c) and (d) of this subsection:

(1) Review the patient's medical record to verify the appropriateness of a specific exam or procedure.
(2) Interview patient to obtain, verify, or update medical history.
(3) Explain procedure to patient, significant others, and/or other health care providers including a description of risks, benefits, alternatives, and follow-up.
(4) Determine patient compliance, if needed, with pre-examination/procedure preparations (diet, medications).
(5) Assess risk factors that may effect the examination/procedure (medications, pregnancy, pre-existing diseases, etc).
(6) Obtain and evaluate vital signs.
(7) Perform history and physical examination with assessment of related laboratory results.
(8) Evaluate electrocardiograms for the purpose of recognizing abnormalities that might impact the procedure/examination.
(9) Performing urinary catheterization.
(10) Perform venipuncture for phlebotomy or IV access.
(11) Monitor IV for flow rate and complications.
(12) Position and physically prepare patient for a procedure.
(13) Observe and assess patients during conscious sedation.
(14) Recognize and respond to medical emergencies (e.g., drug reactions, cardiac arrest, hypoglycemia), activate emergency response systems, and notify appropriate personnel.
(15) Administer oxygen as required.
(16) Operate a fluoroscopic unit and document fluoroscopy time.
(17) Administer contrast media, radioactive materials, or other medication as directed by the supervising radiologist and monitor for any adverse effects.
(18) Evaluate images for diagnostic quality and report clinical observations to the radiologist.
(19) Communicate the radiologist's report to the referring physician consistent with American College of Radiology guidelines.
(20) Provide physician prescribed post-examination/procedure instruction to the patient.
(21) Perform follow-up patient evaluation and communicate findings to the radiologist
(22) Document the appropriate records for review and co-signature by the supervising radiologist.
(23) Assist with data collection and review for clinical trials or other research.

(b) **Health care services allowed under direct supervision.** A radiologist assistant may perform the following health care services under direct supervision at the direction of the supervising radiologist. Such services are limited to the following, except as provided in (c) and (d) of this subsection:

(1) Upper GI, esophagram, small bowel follow-through
(2) Small bowel enteroclysis
(3) Barium enema
(4) Cystogram, nephrostogram via existing catheter, loopogram, and retrograde cystourethrogram
(5) Fistulogram/sinogram
(6) Swallowing study

(7) Cholangiogram through existing catheter
(8) Lumbar puncture under fluoroscopic guidance
(9) Cervical, thoracic and/or lumbar myelogram via lumbar puncture
(10) Imaging for hysterosalpingography
(11) Arthrogram and joint aspiration
(12) Paracentesis and thoracentesis with appropriate image guidance
(13) Vascular access
(A) Central line placement
(B) Tunneled central line placement and removal
(C) Dialysis access catheter management
(D) Port access and injection
(E) Lower and upper extremity venography
(F) PICC placement
(14) Nasoenteric and oroenteric feeding tube placement/manipulation

(c) **Other health care services allowed.**

(1) A radiologist assistant may perform the following procedures under direct supervision after documentation of ten cases with satisfactory outcomes and demonstrated competency performed under the personal supervision of the supervising radiologist who must have a full and unrestricted license in the state of Oklahoma:
(A) Implantation of infusion ports
(B) Explantation of infusion ports
(C) Ultrasound guided random liver biopsy

(2) Other procedures not listed in this subsection may be approved to be performed by the Radiologist Assistant under the direct supervision of the supervising radiologist after review by the Committee for demonstrated competency and approval by the Board.

(d) **Review of health care services performed.** The Committee will, at least on an annual basis, review the structure and content of the list of health care services contained in this subsection and make recommendations for approval of revisions to the Board of Medical Licensure and Supervision.