

ASRT DELEGATE REPORT

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Affiliate: North Carolina Society of Radiologic Technologists

Term: 10/18/08-10/18/10

ASRT Activities Attended for the 2009 House of Delegates

1. Educational Sessions:

- A. “Who is Robert and what are His Rules All About?” -Cathie Kukec, B.M.E., R.T.(R)(QM)
Donna Thaler Long, M.S.M., R.T.(R)(M)(QM), FASRT , Betsy McUne, ASRT Parliamentarian

This session was an overview of parliamentary procedures for new Delegates. It was very helpful in terms of instructing the Delegates as to how to make an amendment to a motion. It also taught the “rules” of using the microphone on the floor.

- i. ASRT Feedback: This was a good session for new delegates. It might have also been helpful as a refresher for “seasoned” delegates. The role-playing or “acting” was both entertaining and helpful.

- B. “ALARA Principles in Pediatric Imaging”- Sue Kaste, D.O.

This session was an overview of CT dose during Pediatric CT exams. It is recommended that each member of the NCSRT go to imagegently.com to review the resources available from the Alliance for Radiation Safety in Pediatric Imaging. There is a pledge for imaging professionals to sign and education resources for both professionals and patients and their parents. There is even a document outlining “How to Develop CT Protocols for Children.”

- i. ASRT Feedback: Excellent presentation and reminder that imaging professionals should be patient advocates and be on the frontline of reducing unnecessary exposure!

- C. “Health Care Economics: Current Realities, Future Trends”- Geoffrey Joyce, Ph.D.

The published abstract for this session best explains its content: “Health care economics are a critical part of the ongoing technology revolution. As new procedures, technology and practices surface, the cost of patient care likely will increase. To highlight the future of the health care economics related to new technologies, this course discusses emerging technologies and their impact on health and health care expenditures in the United States.”

- i. ASRT Feedback: Interesting discussion on technology and the possibility of government run health care. I am not sure that all

health care professionals know that technology has been the primary driver of the increases in monies spent on health care over the last 50 years. It is also interesting that the government pays for ½ of all health care currently. We need to continue to try to get the CARE Bill passed to protect our patients and decrease health care costs.

D. “Affiliate Compliance and Governance”- Liana Watson, D.M., R.T.(R)(M)(S)(BS), RDMS, RVT, FASRT, Dana Aragon, R.T.(R)(M)

All information is important to the NCSRT Board. A copy of the PowerPoint lecture will be send to the NCSRT Board.

- i. ASRT Feedback: As an affiliate delegate, I felt that this information was very helpful and important!

2. ASRT Update Summary

- a. CUTS
 - i. Lost monies in stocks
 - ii. Cut employee benefits-health insurance/staff training
 - iii. Scaled back marketing
 - iv. More communication on website-less paper
 - v. Renegotiated contracts with old vendors and changed so vendors SO
 - vi. STILL HAVE 13M IN RESERVES AND DEBT FREE!
- b. GREW
 - i. Added 3,000 members this year for a total of 132,000
 - ii. Have been growing 2.5% per year
- c. KEY RECRUITMENT EFFORTS
 - i. CT Techs
 - ii. Mammographers
 - iii. Students
 - iv. Recently certified RTs
- d. ADDED BENEFITS (see website for full details)
 - i. Discount on over 50 CE products
 - ii. 20% discount on shoes.com
 - iii. 10% discount on uniforms from Uniform Advantage
 - iv. 20% discount on textbooks
 - v. Vacation rewards program
- e. REVAMPED OLD BENEFITS
 - i. New face of “Scanner”
- f. STRONGER
 - i. Radiologist Assistant (RA) licensure in 26 states (3 considering)
 - ii. MIPPA-CT, MRI, NM and PETS Exams tied to Medicare Reimbursement

- iii. Still trying to get CARE Bill passed.
 - g. RESEARCH
 - i. See website for information on forensic radiography survey and the enrollment snapshot of Rad, Rad Ther and NM programs, 2008.
 - h. RADIATION PROTECTION
 - i. Involved with Image Gently Campaign (www.imagegently.com)
 - ii. Download parent brochure from site
 - iii. Have staff sign pledge to decrease dose
 - i. CE ONLINE
 - i. CE podcasts
 - ii. Partner with GE HC for 33% discount on TIP TV courses
 - iii. ODIA-Online Digital Imaging Academy now available-free to techs and students
 - iv. CT Online CE module—coming soon (1st module up)
 - j. NEW CONFERENCE
 - i. Will join the RSNA and offer 10+ credits on Dec 2nd and 3rd, 2009.
 - k. CAMPAIGNING FOR CHAPTER DELEGATES
 - i. Affiliates are not allowed to post support for members who are running for Chapter Delegate. The ASRT Board is going to work on campaigning guidelines.
 - l. RECRUITMENT
 - i. The affiliate can request that the ASRT e-blast ASRT members in NC for grassroots and legislative issues.
3. ARRT OPEN FORUM
- a. Jordan Renner reviewed the ARRT Update that can be found at: <https://arrt9.s3.amazonaws.com/full.html>
4. Open Forum on Bylaws and Commission Hearing-Attended-nothing specific to report-see voting record of this document
5. CHAPTER MEETINGS
- a. Management Chapter
 - i. Facilitated by Gary Duehring
 - ii. ASRT Staff Member-Kevin Powers
 - iii. Issues
 - 1. The Chapter would like the ASRT to “package” and “advertise” CE specific to management issues and the CRA list of competencies
 - 2. The Chapter will find out information on how MIPPA will affect billing and compliance and will communicate information through e-mail (I post the information to the NCSRT Website when I get it).

iv. Current Chapter Delegates:

Steering Committee Chairman

Term: 6/5/07 - 6/15/09

Gary L. Duehring, Ph.D., R.T.(R)(MR), CRA, FAHRA

5150 Hickory Hollow

Owosso, MI 48867 E-mail: kspacer1@aol.com

Steering Committee Vice Chairman Term: 6/16/08 - 6/15/10

Beth L. Weber, R.T.(R), RDMS

46835 268th St.

Sioux Falls, SD 57106-8026 E-mail: beth.weber@medcath.com

Steven M. Herrmann, M.S., R.T.(R)(M), CRA Term: 6/16/08 - 6/15/10

1354 73rd St., Brooklyn, NY 11228-2104 E-mail: sth9002@nyp.org

Alternate Delegate Randall S. Harp, B.S., R.T.(R)

Term: 6/16/08 - 6/15/09

Allied Medical X-ray Institute

1431 Willamette St. #141

Eugene, OR 97401 E-mail: rharp007@yahoo.com

Alternate Delegate- Susan Cazaux, M.B.A., R.T.(R)(M)

Term: 6/16/08 - 6/15/09

10233 N 52nd Ave., Glendale, AZ 85302-1603

E-mail: scazaux@msn.com

v. Newly Elected Chairman- Beth L. Weber

Newly Elected Vice Chair- Gary L. Duehring

Names submitted for nominations for next ballot:

1. Randy Harp
2. Cathy Parsons

b. Education Chapter Meeting

- i. The Management Chapter Meeting ended early so I went to the end of Education Chapter Meeting.
- ii. It is noted that the JRC Standards Revisions (2nd draft) are posted for review. Feedback can be given through a survey at the JRCERT Website through July 1st. The JRC said that they do look at every comment so please submit them.

6. Life Member Elevation-Polly Story (NC Native and Active NCSRT Member) was elevated to Life Member. She gave an amazing speech and NC should post this accomplishment on the NCSRT Website and put it in the THH Highlights.

7. HOUSE ISSUES

- a. Election Results: Speaker-Donna Long; Vice Speaker-Sandra Hayden

VOTING REPORT

NC DELEGATION MOTIONS:

Bylaws:

1. Article III, Membership, Section 5, Censure, Reprimand and Removal, G., be amended to read: Removal of a member shall be by a three-quarters (3/4) vote of the entire membership of the Board of Directors.

passed: 105 - yes, 41 - no

2. Article V, House of Delegates, Section 4, Meetings, C, line 23, strike the word "ASRT" due to redundancy.

passed: 132 - yes, 15 - no

3. Article V, House of Delegates, Section 9, Censure, Reprimand and Removal, H., be amended to read: Removal of a member shall be by a three-quarters (3/4) vote of the entire membership of the Board of Directors.

passed: 130 - yes, 17 - no

4. Article, V, House of Delegates, Section 5, Letter F, moved to amend by substitution to read: Censure or Reprimand of a House of Delegate member would be by a committee of five (5) members from the House of Delegates composed of the Speaker of the House and four (4) delegates appointed by the Speaker.

d/n pass: 35 - yes, 114 - no

Motions:

1. Moved that the position statement C - 09.33 Campaign Guidelines be sent back to commission.

d/n pass: 59 - yes, 90 - no

This was 2nd by Allen Croat.

2. C-09.16 was put on the list to NOT be sunset then moved to make changes to keep this position statement consistent with new position statement language. It was moved to amend C-09.16, Monitoring Patient Exposure During Utilization of Digital Radiography Systems." The request was to insert the following phrase at the beginning of the statement, "It is the position of" and to strike the word "advocates" before the word "that".

passed: 141-yes, 5-no.

BYLAWS: The final bylaws revision can be found at:

<https://www.asrt.org/Content/News/PressRoom/PR2009/asrtdelega090618.aspx>

The House passed the bylaws revisions with a unanimous vote; 150-0.

**Note, some resolutions were amended multiple times. The votes documented reflect the vote on the final amendment where applicable. All adopted resolutions can be found following this table.

RESOLUTION	COMMENTS	HOD VOTE		MY VOTE	
		YES	NO	YES	NO
C09.01 and C09.01A	Withdrawn from original author—no vote				
C09.02	Voted no because the ARRT is moving towards setting an associate as the minimum entry level for profession and several delegates said that they have “poor” quality certificate programs in their State.	39	109		X
C09.03	Consent Agenda	150	0	X	
C09.04	Consent Agenda	150	0	X	
C.09.05	Consent Agenda	150	0	X	
C.09.06	Will not be sunset; it will remain	49	100		X
C.09.07	Consent Agenda	150	0	X	
C.09.08	Consent Agenda	150	0	X	
C.09.09	Consent Agenda	150	0	X	
C.09.10	Will not be sunset; will remain	13	135		X
C.09.11	Will not be sunset; will remain	8	140		X
C.09.12	Consent Agenda	150	0	X	
C.09.13	Consent Agenda	150	0	X	
C.09.14	Consent Agenda	150	0	X	
C.09.15	Consent Agenda	150	0	X	
C.09.16	Will not be sunset; will remain	14	134		X
C.09.17	Will not be sunset; will remain	14	134		X
C.09.18	Consent Agenda	150	0	X	
C.09.19	Consent Agenda	150	0	X	
C.09.20	Consent Agenda	150	0	X	
C.09.21	This is sunset and gone	88	59		X
C.09.22	Will not be sunset; will remain	19	131		X
C.09.23	Consent Agenda	150	0	X	
C.09.24	Consent Agenda	150	0	X	
C.09.25	Will not be sunset; will remain	13	136		X
C.09.26	Will not be sunset; will remain	27	121		X
C.09.27	Will not be sunset; will remain	23	127		X
C.09.28	Consent Agenda	150	0	X	
C.09.29	Consent Agenda	150	0	X	
C.09.30	Consent Agenda	150	0	X	
C.09.31	Consent Agenda	150	0	X	
C.09.32	Consent Agenda	150	0	X	
C.09.33		138	12	X	
C.09.34	Consent Agenda	150	0	X	
C.09.35	Consent Agenda	150	0	X	
C.09.36		138	8	X	
C.09.37	Consent Agenda	150	0	X	
C.09.38	Consent Agenda	150	0	X	
C.09.39	Consent Agenda	150	0	X	
C.09.40		139	10	X	
C.09.41	Consent Agenda	150	0	X	

C.09.42	Consent Agenda	150	0	X	
C.09.43		139	8	X	
C.09.44	Consent Agenda	150	0	X	
C.09.45	Consent Agenda	150	0	X	
C.09.46	Consent Agenda	150	0	X	
C.09.47	Consent Agenda	150	0	X	
C.09.48	Consent Agenda	150	0	X	
C.09.49	Consent Agenda	150	0	X	
C.09.50	Consent Agenda	150	0	X	
C.09.51	Consent Agenda	150	0	X	
C.09.52	Consent Agenda	150	0	X	
C.09.53	Consent Agenda	150	0	X	
C.09.54	Consent Agenda	150	0	X	
C.09.55	Consent Agenda	150	0	X	
C.09.56	Consent Agenda	150	0	X	
C.09.57		145	2	X	
C.09.58	Consent Agenda	150	0	X	
C.09.59	Consent Agenda	150	0	X	
C.09.60	Consent Agenda	150	0	X	
C.09.61	Consent Agenda	150	0	X	
C.09.62	Consent Agenda	150	0	X	
C.09.63	Consent Agenda	150	0	X	
C.09.64	Consent Agenda	150	0	X	
C.09.65	Consent Agenda	150	0	X	
C.09.66		105	43	X	
C.09.67	Consent Agenda	150	0	X	
C.09.68	Consent Agenda	150	0	X	
C.09.69	Consent Agenda	150	0	X	
C.09.70	Consent Agenda	150	0	X	
C.09.71		136	9	X	
C.09.72		135	9	X	
C.09.73	Consent Agenda	150	0	X	
C.09.74	Consent Agenda	150	0	X	
C.09.75	Consent Agenda	150	0	X	
C.09.76	Consent Agenda	150	0	X	
C.09.77	Consent Agenda	150	0	X	
C.09.78		147	1	X	
C.09.79	Consent Agenda	150	0	X	
C.09.80	Consent Agenda	150	0	X	
C.09.81	Consent Agenda	150	0	X	

The following motions were adopted by the ASRT House of Delegates during its June 14, 2009, annual meeting.

C-09.03

Adoption of New Position Statement “State Agency Recognition of Joint Review Committees”

It is the position of the American Society of Radiologic Technologists (ASRT) that state agencies accept accreditation of radiologic science educational programs by Joint Review Committees or equivalent to meet state standards.

C-09.04

Sunset of Position Statement “ASRT Role in Health Care Delivery Systems and Health Care Policy”

The American Society of Radiologic Technologists (ASRT) supports a proactive approach in the development of health care policy and patient care delivery systems by continuing efforts to develop liaisons with other health professions and to work with regulatory agencies that impact health care.

C-09.05

Sunset of Position Statement “ASRT Endorsement of American Hospital Association’s *The Patient Care Partnership*”

The American Society of Radiologic Technologists (ASRT) endorses the American Hospital Association’s (AHA) *The Patient Care Partnership: Understanding Expectations, Rights and Responsibilities* by reference, and encourages all ASRT members to conduct their practices consistent with the tenets of this document.

C-09.07

Sunset of Position Statement “Cultural Competency in the Radiologic Sciences”

The American Society of Radiologic Technologists (ASRT) endorses culturally competent health care education beginning with the entry-level curriculum and considers continued cultural-competency education necessary for radiologic technologists.

C-09.08

Sunset of Position Statement “Radiologic Science Educational Program Standards”

The American Society of Radiologic Technologists (ASRT) opposes any abbreviated primary educational program for radiologic technologists that does not meet the minimum standards equivalent to those established by the Joint Review Committees or equivalent accreditation agencies.

C-09.09

Sunset of Position Statement “Brachytherapy Remote Afterloading Equipment”

The American Society of Radiologic Technologists (ASRT) advocates that brachytherapy utilizing remote afterloading equipment be performed by credentialed personnel, who may include registered radiation therapists, certified medical dosimetrists, board-certified radiation oncologists and board-certified medical radiation physicists.

C-09.10

Adoption of Amendments to Position Statement “Breast Sonography”

It is the position of the American Society of Radiologic Technologists (ASRT) that breast sonography is within the scope of practice for mammographers and sonographers with appropriate clinical and didactic education and where federal or state law and/or institutional policy permit.

C-09.11

Adoption of Amendments to Position Statement “Definition of Limited X-ray Machine Operator”

It is the position of the American Society of Radiologic Technologists (ASRT) that a limited x-ray machine operator is an individual other than a radiologic technologist who performs static diagnostic x-ray procedures on selected anatomical sites. Limited x-ray machine operator is the term that replaces other terms including, but not limited to, radiologic technician, x-ray technician and limited permittee.

C-09.12

Sunset of Position Statement “Diagnostic Medical Imaging”

The American Society of Radiologic Technologists (ASRT) defines diagnostic medical imaging as the art and science of applying ionizing or nonionizing radiation for diagnostic purposes.

C-09.13

Sunset of Position Statement “HIV and Hepatitis Testing for Health Care Workers”

The American Society of Radiologic Technologists (ASRT) opposes mandatory human immunodeficiency virus (HIV) and hepatitis testing for radiologic technologists. ASRT supports voluntary testing of radiologic technologists for HIV and hepatitis only as a result of occupational exposure.

C-09.14

Sunset of Position Statement “Hyperthermia”

The American Society of Radiologic Technologists (ASRT) supports that the operation of medical hyperthermia equipment to treat human malignancies is best performed by registered radiation therapists.

C-09.15

Sunset of Position Statement “Identification of Registered Radiologic Technologists in the Workplace”

The American Society of Radiologic Technologists (ASRT) advocates that:

Registered radiologic technologists should at all times when on duty wear an insignia that identifies them as registered radiologic technologists;

Registered radiologic technologists should verbally inform patients of who they are and their role in providing care;

Patients should be informed that the registered radiologic technologist demonstrates specialized knowledge in radiologic technology through identification of the credentials earned through certification examinations;

Registered radiologic technologists who have passed a postprimary examination should identify themselves as a radiologic technologist credentialed in that specialty;

Health care facilities should never prohibit personnel from wearing insignia that identifies credentials.

In the event that a facility, including private offices, ambulatory clinics and home care agencies, prohibits or discourages identification of staff credentials, staff members and consumers should

submit written protest to facility administrators, the state's affiliate society, the state's board of health and the Joint Commission (TJC) or equivalent. Registered radiologic technologists should advocate that their state practice act mandate identification of professional title and credentials.

C-09.16

Adoption of Amendments to Position Statement “Monitoring Patient Exposure During Utilization of Digital Radiography Systems”

It is the position of the American Society of Radiologic Technologists (ASRT) that health care facilities using digital radiography systems should monitor patient exposure. Exposure indicator data should be included in the Digital Imaging Communications in Medicine (DICOM) header for images sent to picture archiving and communication systems (PACS) or in the patient demographics field for images printed to film, and in either case should be part of the permanent patient record. The exposure indicator should not be altered to modify image appearance and should accurately record the exposure or exposure factors used in producing the image. Health care facilities should collect patient exposure range distributions and reject analyses as part of the quality assurance program. This exposure data should be reviewed routinely by the health care facility.

C-09.17

Adoption of Amendments and Retitling of Position Statement “Multiloading of Film Cassettes”

New Title: Opposition to Multiloading of Film Cassettes

The American Society of Radiologic Technologists (ASRT) is opposed to the multiloading of film cassettes to produce a copy of a radiograph. This practice is inconsistent with the “as low as reasonably achievable” (ALARA) principle.

C-09.18

Sunset of Position Statement “Operation of Simulation and Radiation Therapy Treatment Units”

It is the position of the American Society of Radiologic Technologists (ASRT) that the operation of simulation and radiation therapy treatment units is best performed by registered radiation therapists.

C-09.19

Sunset of Position Statement “Radiologic Requests by Licensed Independent Practitioners”

The American Society of Radiologic Technologists (ASRT) endorses the standards of the Joint Commission on the Accreditation of Healthcare Organizations (JCAHO) or equivalent in reference to radiologic procedures requested by licensed independent practitioners where federal or state law and/or institutional policy permit.

C-09.20

Sunset of Position Statement “Radiologic Technologists Performing Diagnostic Medical Sonography”

The American Society of Radiologic Technologists (ASRT) advocates that diagnostic medical sonography is a scope of practice for the radiologic technologist certified in sonography. Sonographer describes the radiologic technologist certified in sonography.

C-09.21

Sunset of Position Statement “Regulatory Compliance Associated with Contrast Media and Other Pharmaceuticals”

The American Society of Radiologic Technologists (ASRT) advocates that radiologic technologists understand and maintain compliance with the Joint Commission (TJC) standards, state laws and regulations, and institutional policies regarding the dispensing and administration of contrast media and other pharmaceuticals.

C-09.22

Adoption of Amendments to Position Statement “Removal of Devices for Invasive Radiologic Procedures”

It is the position of the American Society of Radiologic Technologists (ASRT) that the removal of devices for invasive radiologic procedures is within the scope of practice for radiologic technologists with appropriate clinical and didactic education and where federal or state law and/or institutional policy permit.

C-09.23

Sunset of Position Statement “Spot Filming a Voiding Cystogram Study”

The American Society of Radiologic Technologists (ASRT) advocates that spot filming of a voiding cystogram is within the scope of practice for radiographers with appropriate clinical and didactic education and where federal or state law and/or institutional policy permit.

C-09.24

Sunset of Position Statement “Technical Assistants and Aides in Radiologic Technology”

The American Society of Radiologic Technologists (ASRT) recognizes that it is necessary for health care entities to employ personnel to perform some of the less technical functions of radiologic technology, e.g., film processing, filing and patient transportation. This category of employment is recognized as an introduction to a career in the radiologic sciences.

C-09.25

Adoption of Amendments to Position Statement “Vascular Access”

It is the position of the American Society of Radiologic Technologists (ASRT) that accessing existing peripheral or central vascular implanted devices or external access lines to administer contrast media, radiopharmaceuticals and medications or maintaining line patency is within the scope of practice for radiologic technologists with appropriate clinical and didactic education and where federal or state law and/or institutional policy permit.

C-09.26

Adoption of Amendments to Position Statement “Verbal and/or Telephone Orders”

It is the position of the American Society of Radiologic Technologists (ASRT) that it is within the scope of practice of radiologic technologists to receive, relay and document verbal, facsimile, electronic and/or telephone orders in the patient’s chart where federal or state law and/or institutional policy permit.

C-09.27

Adoption of Amendments to Position Statement “Wearing Radiation Monitoring Devices”

It is the position of the American Society of Radiologic Technologists (ASRT) that radiation workers wear a personal monitoring device outside of the apron at the level of the thyroid to approximate the maximum dose to the head and neck. In specific cases such as pregnancy, high-dose fluoroscopy or high-dose rate brachytherapy, a second monitor may be indicated. The monitor should be worn at the waist under protective apparel, if appropriate.

Support education programs for health care professionals to assure an adequate supply of well-educated providers.

Each radiologic technologist should maintain consistency of location in wearing of the personal monitoring device.

Additional information on the use of personal radiation monitors and radiation protection practices for radiation workers; minor workers and declared pregnant workers may be found in:

10 CFR Part 19.12.

10 CFR Part 20.1208.

NRC Regulatory guides #8.2, 8.7, 8.13, 8.29, 8.34, 8.36, may be obtained from the NRC via the Public Document room at 1-800-397-4209 or via the Electronic Reading room ADAMS access system on their Web site at www.nrc.gov.

Pregnancy Disability Law, P.L. 95-555.

NCRP Report #116. *Limitation of Exposure to Ionizing Radiation* (1993).

NCRP Report #122, *Use of Personal Monitors to Estimate Effective Dose Equivalent and Effective Dose to Workers for External Exposure to Low-LET Radiation* (1995).

ICRP Publication #73. *Radiological Protection and Safety in Medicine*.

ICRP Publication #75. *General Principles for the Radiation Protection of Workers*.

ICRP Publication #84. *Pregnancy and Medical Radiation*.

C-09.28

Sunset of Position Statement “Health Care Reform”

The ASRT is the national association that represents more than 129,000 professionals who practice within the radiologic sciences. The members of ASRT are committed to the diagnosis and treatment of disease or injury at a level of quality that allows safe and equal access to health care for the public.

The members of the radiologic sciences can and should play an important role in the delivery of health care. Expansion of the scopes of practice and continued progress in educational evolution for the radiologic sciences allow those individuals to better meet the needs of the health care system.

As those members of the health care team who see nearly every patient within the system at some point, the ASRT offers the following recommendations to ensure access to care, quality of care, prevention and cost containment.

Access to Care

Provide equal access for all individuals regardless of position or economic status.

Assure qualified individuals obtain the necessary diagnostic information or deliver the appropriate treatment to the customers of the health care system.

Recognize universally the ability of the radiologic technologist to assist in determining the need for diagnostic and therapeutic procedures and the most appropriate method to obtain the desired diagnosis.

Include a radiologic technologist in the administrative decision-making process of a managed care system.

Develop policies that only recognize reimbursement for procedures performed by a certified and qualified individual for obtaining the diagnostic product or delivering the treatment through ionizing radiation, magnetic resonance or sonographic methods.

Disseminate information to the patient when individuals other than those educated in the discipline are allowed to practice the discipline.

Quality of Care

Include representatives from the radiologic sciences in developing guidelines concerning the delivery of health care through the efforts of those providers within the radiologic sciences.

Undertake efficacy studies to ensure the appropriate use of the technology available. Those who perform the studies should be supported in the conduct of that study.

Ensure that only those individuals educated and credentialed within the radiologic sciences are recognized as appropriate providers of the service.

Include radiologic science providers as a part of any managed care or patient-focused care team to ensure appropriate quality in the arena of ionizing radiation and diagnostic imaging.

Prevention

Increase preventive medicine activities by offering incentives.

Assure reduced radiation exposure to the population through quality control and continuing education to providers within the radiologic science community.

Cost Containment

Prohibit non-qualified individuals from performing diagnostic or therapeutic procedures.

Develop appropriate technical fee structures to support appropriate personnel and equipment that generate quality diagnostic and therapeutic procedures.

Establish billing codes that specify those professionals who are licensed or certified to perform the service requested and covered by those codes.

Allow professional standards to determine the extent of practice based on educational preparation.

C-09.29

Sunset of Position Statement “Quality Assessment and Improvement for Radiologic Sciences”

The ASRT recognizes that quality assessment and improvement refers to the comprehensive system or method of service and practice evaluation. Compliance with established requirements and standards, whether departmental, institutional, accredited agency or governmental/legislative, are measurable, thus indicating a certain quality status or level. Relevant to compliance with such standards, and when necessary, established methods of analysis are employed with possible corrective actions to facilitate improvement in process or clinical functions and outcomes.

C-09.30

Sunset of Position Statement “Radiologic Science Working Environment”

The American Society of Radiologic Technologists (ASRT) acknowledges that it is the shared responsibility of the radiologic technologist and the employer to provide a safe, efficient, pleasant and supportive work environment. The radiologic technologist should actively participate in this process.

C-09.31

Sunset of Position Statement “Support of the Mammography Quality Standards Act”

The American Society of Radiologic Technologists (ASRT) supports the Mammography Quality Standards Act of 1992 and subsequent reauthorizations.

C-09.32

Sunset of Position Statement “Safe Handling of Radiographic Chemicals”

The American Society of Radiologic Technologists (ASRT) advocates that radiologic technologists and health care facilities be aware of and follow current Occupational Health and Safety Administration (OSHA) regulations for occupational exposure to hazardous chemicals in laboratories including photographic and radiographic processing chemicals.

C-09.33

Adoption of Amendments to Position Statement “Campaign Guidelines”

It is the position of the American Society of Radiologic Technologists (ASRT) that ASRT members running for national office or chapter delegate positions shall limit their campaign activities to ASRT-published candidate position statements to ensure fairness and equal opportunity for all candidates.

C-09.34

Adoption of Amendments to Position Statement “Public Health Statements”

It is the position of the American Society of Radiologic Technologists (ASRT) that the Society release position statements on public health issues to increase public awareness of the diverse contributions in health care by the members of the ASRT.

C-09.35

Adoption of Amendments to Position Statement “Unification of the Profession”

It is the position of the American Society of Radiologic Technologists (ASRT) that the Society foster unification of the radiologic science profession.

C-09.36

Adoption of Amendments to Position Statement “Conjoint Evaluation of Educational Programs”

It is the position of the American Society of Radiologic Technologists (ASRT) that, in states where state agencies approve radiologic science educational programs, evaluation of such programs be conducted jointly by the state agency and the applicable Joint Review Committee(s) or equivalent.

C-09.37

Adoption of Amendments to Position Statement “Degree Requirements for Radiologic Science Program Directors and Clinical Coordinators”

It is the position of the American Society of Radiologic Technologists (ASRT) that radiologic science program directors hold a minimum of a master’s degree and that clinical coordinators hold a minimum of a baccalaureate degree.

C-09.38

Adoption of Amendments to Position Statement “Education of Personnel Performing Digital Radiography”

It is the position of the American Society of Radiologic Technologists (ASRT) that all personnel performing digital radiography be educationally prepared and clinically competent in the operation of this equipment, including methods to reduce patient radiation dose.

C-09.39

Adoption of Amendments to Position Statement “Entry Level of Education for Radiation Therapists”

It is the position of the American Society of Radiologic Technologists (ASRT) that the baccalaureate degree is the entry level for radiation therapists.

C-09.40

Adoption of Amendments to Position Statement “Entry Level of Education for Radiographers”

It is the position of the American Society of Radiologic Technologists (ASRT) that the associate degree is the entry level for radiographers.

C-09.41

Adoption of Amendments to Position Statement “Level of Education for the Radiologic Science Profession”

It is the position of the American Society of Radiologic Technologists (ASRT) that the baccalaureate degree is the professional level of radiologic science education if it contains upper division coursework in radiologic science.

C-09.42

Adoption of Amendments to Position Statement “Lifelong Learning in the Radiologic Sciences”

It is the position of the American Society of Radiologic Technologists (ASRT) that radiologic technologists engage in lifelong learning through self-initiated, self-directed and self-evaluated education and training for the purposes of professional development, personal enhancement and quality of care improvement.

C-09.43

Adoption of Amendments and Retitling of Position Statement “Limited X-Ray Machine Operator Education”

New title: Limited X-Ray Machine Operator Education and Examination

It is the position of the American Society of Radiologic Technologists (ASRT) that the educational requirements for limited x-ray machine operators meet the ASRT Limited X-ray Machine Operator Curriculum and examinees successfully pass the American Registry of Radiologic Technologists (ARRT) limited scope of practice exam.

C-09.44

Adoption of Amendments and Retitling of Position Statement “Standards of Education and Certification for Radiologic Technologists”

New Title: Federal Minimum Standards for Medical Imaging and Radiation Therapy

It is the position of the American Society of Radiologic Technologists (ASRT) that the U.S. Congress should enact federal minimum standards of education and certification for all individuals performing medical imaging or planning and/or delivering radiation therapy. Such standards should be, at the minimum, equivalent to those established for educational accreditation by the Joint Review Committees or equivalent and certification by the American Registry of Radiologic Technologists (ARRT) or equivalent.

C-09.45

Adoption of Amendments and Retitling of Position Statement “Institutional Licensure of Radiologic Technologists”

New Title: Opposition to Institutional Licensure of Radiologic Technologists

The American Society of Radiologic Technologists (ASRT) is opposed to institutional licensure of radiologic technologists.

C-09.46

Adoption of Amendments to Position Statement “Majority Representation on State Radiologic Technologist Licensure or Regulatory Boards and Committees”

It is the position of the American Society of Radiologic Technologists (ASRT) that the majority of members appointed or designated to serve on state radiologic technologist licensure or regulatory boards and committees be practicing registered radiologic technologists with expertise in the disciplines licensed or regulated by that entity.

C-09.47

Adoption of Amendments and Retitling of Position Statement “Restricted Supervision by Limited X-ray Machine Operators”

New Title: Opposition to Supervision by Limited X-ray Machine Operators

It is the position of the American Society of Radiologic Technologists (ASRT) that limited x-ray machine operators not be permitted to supervise or manage the technical aspects of imaging procedures performed by registered radiologic technologists.

C-09.48

Adoption of Amendments and Retitling of Position Statement “State Licensure Examinations by the American Registry of Radiologic Technologists”

New Title: State Licensure Examinations by the American Registry of Radiologic Technologists (ARRT)

It is the position of the American Society of Radiologic Technologists (ASRT) that state agencies should contract with the American Registry of Radiologic Technologists (ARRT) to administer state licensure examinations.

C-09.49

Adoption of Amendments and Retitling of Position Statement “Supervision and Training Responsibilities for Radiologic Technologists”

New Title: Opposition to Radiologic Technologists Supervising and/or Training Unlicensed or Uncertified Individuals

The American Society of Radiologic Technologists (ASRT) opposes any radiologic technologist being required to supervise and/or train any unlicensed or uncertified individuals in the delivery of medical imaging or radiation therapy procedures unless they are enrolled in or have graduated from an educational program in the radiologic sciences accredited by a mechanism recognized by the American Registry of Radiologic Technologists (ARRT) or equivalent.

C-09.50

Adoption of Amendments to Position Statement “Definition of Radiologist Assistant”

The American Society of Radiologic Technologists (ASRT) defines the radiologist assistant as an individual who holds the radiologist assistant credential from the American Registry of Radiologic Technologists (ARRT) and who has successfully completed an advanced academic program encompassing a nationally recognized radiologist assistant curriculum that includes a radiologist-directed clinical preceptorship, and that culminates in the award of a baccalaureate degree, post-baccalaureate certificate or graduate degree.

C-09.51

Adoption of Amendments and Retitling of Position Statement “Drug Administration by Radiologic Technologists”

New Title: Medication Administration by Radiologic Technologists

It is the position of the American Society of Radiologic Technologists (ASRT) that preparation, identification and administration of contrast media, radiopharmaceuticals and/or medications are within the scope of practice of radiologic technologists with appropriate clinical and didactic education and where federal or state law and/or institutional policy permit.

C-09.52

Adoption of Amendments and Retitling of Position Statement “Injection of Contrast Media and Other Medications by Radiologic Technologists”

New Title: Medication and Contrast Media Injections by Radiologic Technologists.

It is the position of the American Society of Radiologic Technologists (ASRT) that, absent specific protocols, the parenteral injection of contrast media and other medications by radiologic technologists be performed only when a licensed independent practitioner or radiologist where required, is immediately available to ensure proper diagnosing of and treatment for possible allergic reaction.

C-09.53

Adoption of Amendments to Position Statement “Ensuring Radiation Exposures Are As Low As Reasonably Achievable”

It is the position of the American Society of Radiologic Technologists (ASRT) that all individuals performing medical imaging and radiation therapy procedures employ the “as low as reasonably achievable” (ALARA) principle to minimize patient and occupational radiation dose.

C-09.54

Adoption of Amendments to Position Statement “Evaluating Medical Images for Technical Adequacy”

It is the position of the American Society of Radiologic Technologists (ASRT) that the technical adequacy of medical images produced by a registered or licensed radiologic technologist only be evaluated by a registered radiologic technologist within their scope of practice.

C-09.55

Adoption of Amendments and Retitling of Position Statement “Fluoroscoping for Positioning”

New Title: Opposition to Use of Fluoroscopy for Positioning

The American Society of Radiologic Technologists (ASRT) opposes the use of fluoroscopy to ensure proper positioning for radiography prior to making an exposure. This is unethical, increases patient dose and should never be used in place of appropriate skills required of the competent radiologic technologist.

C-09.56

Adoption of Amendments to Position Statement “Fluoroscopy by Radiologic Technologists”

It is the position of the American Society of Radiologic Technologists (ASRT) that fluoroscopy is within the scope of practice of radiologic technologists with the appropriate clinical and didactic education and where federal or state law and/or institutional policy permits.

C-09.57

Adoption of Amendments and Retitling of Position Statement “Investigation and Utilization of Collective Bargaining Units”

New Title: Collective Bargaining Units

It is the position of the American Society of Radiologic Technologists (ASRT) that the Society not serve as a collective bargaining unit.

C-09.58

Adoption of Amendments to Position Statement “Limited X-ray Machine Operator Scope of Practice”

It is the position of the American Society of Radiologic Technologists (ASRT) that the limited x-ray machine operator’s (LXMO) scope of practice be restricted to practices covered in the ASRT curriculum for limited x-ray machine operators. Procedures excluded from the LXMO scope of practice include fluoroscopy, contrast procedures, computed tomography (CT), mammography and mobile imaging.

C-09.59

Adoption of Amendments and Retitling of Position Statement “Peripherally Inserted Central Catheter Lines or Ports for Power Injectors”

New Title: Peripherally Inserted Central Catheter (PICC) Lines or Ports for Power Injectors

It is the position of the American Society of Radiologic Technologists (ASRT) that the use of power injectors with peripherally inserted central catheter (PICC) lines or ports is within the scope of practice for radiologic technologists with the appropriate clinical and didactic education when a Food and Drug Administration (FDA) approved PICC line catheter or port specifically for power injectors is used, when manufacturer guidelines regarding infusion rate and pressure are followed and where federal or state law and/or institutional policy permits.

C-09.60

Adoption of Amendments and Retitling of Position Statement “Placement and Removal of Peripherally Inserted Central Catheter (PICC)”

New Title: Peripherally Inserted Central Catheter (PICC) Placement and Removal

It is the position of the ASRT that placement and removal of peripherally inserted central catheters (PICC) is within the scope of practice for radiologic technologists with appropriate clinical and didactic education where state statutes and/or institutional policy permits.

C-09.61

Adoption of Amendments to Position Statement “Pregnant Radiologic Technologists and the Magnetic Resonance Environment”

It is the position of the American Society of Radiologic Technologists (ASRT) that the pregnant radiologic technologist should not enter the magnetic resonance (MR) scanner/magnet room while scanning is in progress due to limited knowledge of the effects of gradient magnetic/radiofrequency fields.

C-09.62

Adoption of Amendments and Retitling of Position Statement “Qualifications for Performing Bone Mineral Densitometry”

New Title: Qualifications for Performing Bone Densitometry

It is the position of the American Society of Radiologic Technologists (ASRT) that only radiologic technologists certified in bone densitometry by the American Registry of Radiologic Technologists (ARRT), the International Society for Clinical Densitometry (ISCD) or equivalent perform all bone densitometry procedures.

C-09.63

Adoption of Amendments to Position Statement “Qualifications for Performing Breast Sonography”

It is the position of the American Society of Radiologic Technologists (ASRT) that only radiologic technologists certified in breast sonography by the American Registry for Diagnostic Medical Sonography (ARDMS) or the American Registry of Radiologic Technologists (ARRT) or equivalent perform all breast sonography procedures.

C-09.64

Adoption of Amendments and Retitling of Position Statement “Qualifications for Performing Cardiovascular-interventional Radiography”

New Title: Qualifications for Performing Cardiac-Interventional, Cardiovascular-Interventional and Vascular-Interventional Radiography

It is the position of the American Society of Radiologic Technologists (ASRT) that only radiologic technologists credentialed in cardiovascular-interventional (CI), vascular-interventional (VI), or cardiovascular-interventional (CV) radiography by the American Registry of Radiologic Technologists (ARRT) or radiologic technologists credentialed as registered cardiovascular invasive specialists (RCIS) by Cardiovascular Credentialing International (CCI) perform all cardiovascular-interventional procedures.

C-09.65

Adoption of Amendments to Position Statement “Qualifications for Performing Computed Tomography”

It is the position of the American Society of Radiologic Technologists (ASRT) that only radiologic technologists certified in computed tomography (CT) by the American Registry of Radiologic Technologists (ARRT) or equivalent perform all diagnostic and interventional computed tomography procedures.

C-09.66

Adoption of Amendments and Retitling of Position Statement “Qualifications for Performing Diagnostic and Interventional Radiography”

New Title: Qualifications for Performing Medical Radiography

It is the position of the American Society of Radiologic Technologists (ASRT) that only radiologic technologists certified in radiography by the American Registry of Radiologic Technologists (ARRT) or equivalent perform all medical radiography procedures.

C-09.67

Adoption of Amendments to Position Statement “Qualifications for Performing Magnetic Resonance”

It is the position of the American Society of Radiologic Technologists (ASRT) that only radiologic technologists certified in magnetic resonance (MR) by the American Registry of Radiologic Technologists (ARRT) or equivalent perform all diagnostic and interventional magnetic resonance procedures.

C-09.68

Adoption of Amendments to Position Statement “Qualifications for Performing Mammography”

It is the position of the American Society of Radiologic Technologists (ASRT) that only radiologic technologists certified in mammography by the American Registry of Radiologic Technologists (ARRT) or equivalent perform all mammography procedures.

C-09.69

Adoption of Amendments to Position Statement “Qualifications for Performing Nuclear Medicine”

It is the position of the American Society of Radiologic Technologists (ASRT) that only radiologic technologists certified in nuclear medicine by the American Registry of Radiologic Technologists (ARRT), Nuclear Medicine Technology Certification Board (NMTCB) or equivalent perform all nuclear medicine procedures.

C-09.70

Adoption of Amendments to Position Statement “Qualifications for Performing Radiation Therapy Procedures”

New Title: Qualifications for Performing Radiation Therapy

It is the position of the American Society of Radiologic Technologists (ASRT) that only radiologic technologists certified in radiation therapy by the American Registry of Radiologic Technologists (ARRT) or equivalent perform all radiation therapy procedures.

C-09.71

Adoption of Amendments to Position Statement “Qualifications for Performing Sonography”

It is the position of the American Society of Radiologic Technologists (ASRT) that only radiologic technologists certified in sonography by the American Registry for Diagnostic Medical Sonography (ARDMS) or the American Registry of Radiologic Technologists (ARRT) or equivalent perform all sonography procedures.

C-09.72

Adoption of Amendments and Retitling of Position Statement “Qualifications of Personnel Utilizing Hybrid Imaging Equipment in Performing Fusion Imaging Examinations”

New Title: Personnel Qualifications for Image Acquisition With Hybrid Imaging Equipment in Fusion Mode

It is the position of the American Society of Radiologic Technologists (ASRT) that radiologic technologists performing multiple modality fusion imaging be certified by the American Registry of Radiologic Technologists (ARRT), Nuclear Medicine Technology Certification Board (NMTCB), American Registry for Diagnostic Medical Sonography (ARDMS) or

equivalent and be educationally prepared and clinically competent in all components of the specific fusion procedures.

C-09.73

Adoption of Amendments to Position Statement “Radiographic Technique Charts”

It is the position of the American Society of Radiologic Technologists (ASRT) that radiographic technique charts be used by persons performing radiography and that all health care facilities make radiographic technique charts available to persons performing radiography.

C-09.74

Adoption of Amendments and Retitling of Position Statement “Trade Schools”

New Title: Opposition to Listing in Trade School Directories

It is the position of the American Society of Radiologic Technologists (ASRT) that radiologic technology is a profession. The ASRT does not sanction the listing of radiologic technology educational programs in any trade school directory.

C-09.75

Adoption of Amendments and Retitling of Position Statement “Use of Medical Ultrasound for Nonmedically Prescribed Purposes”

New Title: Opposition to Use of Medical Ultrasound for Nonmedical Purposes

The American Society of Radiologic Technologists (ASRT) opposes the use of medical ultrasound for the purpose of nonmedical entrepreneurial application or entertainment contrary to the tenets of ethical medical practice.

C-09.76

Adoption of Amendments to Position Statement “Use of Imaging Specialties in Radiation Therapy”

It is the position of the American Society of Radiologic Technologists (ASRT) that it is within the radiation therapist’s scope of practice to utilize radiography, fluoroscopy, computed tomography (CT), magnetic resonance (MR) imaging and sonography for the explicit intent of simulation, treatment planning or treatment delivery with appropriate clinical and didactic education and the demonstration of competency, where federal or state law and/or institutional policy permit.

C-09.77

Adoption of Amendments to Position Statement “Venipuncture”

It is the position of the American Society of Radiologic Technologists (ASRT) that performing venipuncture to administer contrast media, radiopharmaceuticals and/or medications is within the scope of practice for radiologic technologists with appropriate clinical and didactic education and where federal or state law and/or institutional policy permit.

C-09.78

Adoption of Amendments and Retitling of Position Statement “Computed Tomography Exams on Pediatric Patients”

New Title: Computed Tomography (CT) Procedures on Pediatric Patients

It is the position of the American Society of Radiologic Technologists (ASRT) that computed tomography (CT) procedures performed on children employ the “as low as reasonably achievable” (ALARA) principle.

C-09.79

Adoption of Amendments and Retitling of Position Statement “Documentation of Patient Radiation Exposure and Shielding for Computed Tomography and Fluoroscopic Examinations and Procedures”

New Title: Documentation of Patient Radiation Exposure and Shielding for Computed Tomography (CT) and Fluoroscopic Procedures

It is the position of the American Society of Radiologic Technologists (ASRT) that facilities document patient dose, patient dose indicator readings, patient exposure indicator readings or technical factors and use of shielding for computed tomography (CT) and fluoroscopic procedures.

C-09.80

Adoption of Amendments and Retitling of Position Statement “Full-body Computed Tomography (CT) Screening on Asymptomatic Patients”

New Title: Opposition to Use of Full-body Computed Tomography (CT) Screening

The American Society of Radiologic Technologists (ASRT) opposes the use of full-body computed tomography (CT) as a screening tool.

C-09.81

Adoption of Amendments and Retitling of Position Statement “Quality of Care in Health Care Delivery Systems”

New Title: Opposition to Employment of Uncertified or Unlicensed Individuals

The American Society of Radiologic Technologists (ASRT) opposes the employment or utilization of uncertified or unlicensed individuals to administer ionizing or nonionizing radiation for diagnostic or therapeutic procedures. This is a breach of responsibility of the health care industry in providing quality patient care.