

Filippone, Jennifer

From: O'Connor, Edward Dean <Ed.OConnor@quinnipiac.edu>
Sent: Sunday, August 14, 2011 10:29 AM
To: Filippone, Jennifer
Cc: Gonzalez, Ramon; O'Connor, Edward Dean
Subject: CONNECTICUT LICENSURE SCOPE OF PRACTICE REVISION REQUEST
Attachments: Radiologist Assistant - Scope of Practice.docx

Follow Up Flag: Follow up
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Dear Ms. Filippone,

Please accept the attachment as a request for a revision to the scope of practice for Radiologist Assistants (RA) pursuant to Public Act 11-209. The requested change in scope of practice is aligned with the guidelines supported by the American College of Radiology, the American Society of Radiological Technologists, and the American Registry of Radiological Technologists. The scope of practice for Radiologist Assistants in New York and Massachusetts are aligned to these guidelines and consequently RAs are more employable in those nearby states. The proposed change would increase the employability of RAs in Connecticut and would therefore increase access for CT residents to important imaging diagnostic tests and interventions.

Please feel free to contact me with any further questions.

Thank you for your time and consideration.

Regards,

Edward R. O'Connor, Ph.D.
Dean, School of Health Sciences
Quinnipiac University
Hamden, CT 06518
203-582-5202
203-582-8706 Fax
edward.oconnor@quinnipiac.edu

RADIOLOGIST ASSISTANT

CONNECTICUT LICENSURE SCOPE OF PRACTICE REVISION REQUEST

The purpose of this request is to amend Section 20-74mm of the Connecticut General statutes regarding the CT Radiologist Assistant license in CT, adopting the recommendations of the American College of Radiology and the Legislative section of the Radiological Society of Connecticut. These changes are also endorsed by the Connecticut Society of Radiologic Technologists.

The current statute requires personal supervision for routinely performed procedures in the radiology department. This level of supervision makes it impractical for Radiologists to employ Radiologist Assistants. The standards set in other states that license Radiologist Assistant's follow the recommendations of the American College of Radiology. We respectfully propose the same standards be adopted in Connecticut.

These changes will allow Radiologist Assistants to participate in direct patient care, counseling and post procedural follow up, improving patient safety, lowering cost and at the same time increase efficiency in the Radiology Department.

-Radiologist Assistants can be licensed in the state of CT requiring prior board certification by the American Registry of Radiology Technologists.

-No previous changes have been enacted in the scope of practice of the RAs in CT.

-The proposed changes will make the RA scope of practice in CT similar to standards in NY and MA.

-Savings in health care delivery will be achieved since the reimbursements of RA services are similar to other physician extenders, and significantly lower than practicing radiologists.

-Quinnipiac University has had a Masters Degree RA training program since 2008 collaborating closely with the diagnostic radiology department of Yale New Haven Hospital and Yale University School of Medicine. Both realize the important contribution to patient care and safety that RAs bring to health care delivery. Yale is waiting for changes in the scope of practice in order to

hire RAs to deliver services in the DI and ED departments. Unfortunately, to date no RAs are practicing in the state of CT due to the language in the Scope of Practice. Graduates from QU are currently practicing in NY, MA and IN.

The proposed changes to the statute will allow QU to invite the participation of additional health care centers in CT to provide training and employment to Radiologist Assistants.

The following is the proposed statute change:

Section 20-74mm of the Connecticut General Statutes is hereby repealed and the following substituted thereof (*Effective upon passage*):

(a) As used in this section:

(1) "Direct supervision" means a radiologist must be present in the office suite and immediately available to furnish assistance and direction throughout the performance of the procedure;

(2) "Personal supervision" means a radiologist must be in attendance in the room during the performance of the procedure;

(3) "Radiologist assistant" means a radiologic technologist who is licensed pursuant to this chapter and who: (A) Has graduated from a radiologist assistant education program recognized by the American Registry of Radiologic Technologists; (B) has passed the radiologist assistant examination offered by the American Registry of Radiologic Technologists; (C) maintains a current license in good standing as a radiologic technologist in Connecticut; (D) holds current certification in advanced cardiac life support; (E) maintains current certification with the American Registry of Radiologic Technologists as a radiographer; (F) maintains current certification with the American Registry of Radiologic Technologists as a radiologist assistant; and (G) maintains professional liability insurance or other indemnity against liability for professional malpractice in an amount that shall not be less than five hundred thousand dollars for one person, per occurrence, with an aggregate of not less than one million five hundred thousand dollars;

(4) "Supervising radiologist" means a physician who is licensed pursuant to chapter 370 and who is board certified in radiology, who assumes

responsibility for the supervision of services rendered by a radiologist assistant; and

(5) "Supervision" means the exercise by the supervising radiologist of oversight, control and direction of the services of a radiologist assistant. Supervision includes, but is not limited to: (A) Continuous availability of direct communication between the supervising radiologist and the radiologist assistant; (B) active and continuing overview of the radiologist assistant's activities to ensure that the supervising radiologist's directions are being implemented and to support the radiologist assistant in the performance of his or her services; (C) personal review by the supervising radiologist of the radiologist assistant's practice at least weekly or more frequently as necessary to ensure quality patient care; (D) review of the charts and records of the radiologist assistant on a regular basis, as necessary, to ensure quality patient care; and (E) delineation of a predetermined plan for emergency situations.

(b) Nothing in chapter 370 shall be construed to prohibit a radiologist assistant from performing radiologic procedures under the direct supervision and direction of a physician who is licensed pursuant to chapter 370 and who is board certified in radiology. **The permitted procedures and the level of supervision required will be according to those which are jointly determined, from time to time, by the American College of Radiology, The American Society of Radiological Technologists, and the American Registry of Radiological Technologists.** A radiologist assistant may perform radiologic procedures delegated by a supervising radiologist provided: (1) The supervising radiologist is satisfied as to the ability and competency of the radiologist assistant; (2) such delegation is consistent with the health and welfare of the patient and in keeping with sound medical practice; (3) the supervising radiologist shall assume full control and responsibility for all procedures performed by the radiologist assistant; and (4) such procedures shall be performed under the oversight, control and direction of the supervising radiologist. Delegated procedures shall be implemented in accordance with written protocols established by the supervising radiologist. [In addition to those procedures that the supervising radiologist deems appropriate to be performed under personal supervision, the following procedures shall be performed under personal supervision: (A) Lumbar puncture under fluoroscopic guidance, (B) lumbar myelogram, (C) thoracic or cervical myelogram, (D) nontunneled venous central line placement, (E) venous catheter placement for dialysis, (F) breast needle

localization, and (G) ductogram.]

(c) A radiologist assistant shall not: (1) Interpret images, (2) make diagnoses, (3) prescribe medications or therapies, or (4) administer **general or moderate** anesthesia, **including conscious sedation**.

(d) Each radiologist assistant practicing in this state shall have a clearly identified supervising radiologist who maintains the final responsibility for the care of patients and the performance of the radiologist assistant. A licensed radiologist may function as a supervising radiologist for no more than two full-time radiologist assistants concurrently, or the part-time equivalent thereof. Any services provided by the radiologist assistant must be performed at either the physical location of the supervising radiologist's primary medical practice or within any health care facility where the supervising radiologist holds staff privileges.

(e) Nothing in this section shall be construed to apply to the activities and services of a person who is enrolled in a radiologist assistant education program recognized by the American Registry of Radiologic Technologists provided such activities and services are incidental to the course of study.