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ARCHIVES DIVISION

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NOTICE OF PROPOSED RULEMAKING
INCLUDING STATEMENT OF NEED & FISCAL IMPACT

CHAPTER 337
BOARD OF MEDICAL IMAGING

FILED

10/25/2023 2:14 PM
ARCHIVES DIVISION
SECRETARY OF STATE

FILING CAPTION: Simplifies language, amends LXMO rules, rules for hybrid imaging, clarity in temporary licensure rules

LAST DAY AND TIME TO OFFER COMMENT TO AGENCY: 01/25/2024 11:00 AM

The Agency requests public comment on whether other options should be considered for achieving the rule's substantive goals while reducing negative economic impact of the rule on business.

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Filed By:
Stacy Katler
Rules Coordinator

HEARING(S)

Auxiliary aids for persons with disabilities are available upon advance request. Notify the contact listed above.

DATE: 01/25/2024

TIME: 10:00 AM - 11:00 AM

OFFICER: Stacy L Katler

HEARING LOCATION

ADDRESS: Stacy L Katler, 800 NE Oregon St # 1160A, Portland, OR 97232

REMOTE MEETING DETAILS

PHONE NUMBER: 971-673-0216

NEED FOR THE RULE(S)

The Board needs to update and clarify rule language, simplify LXMO rules and time-lines

DOCUMENTS RELIED UPON, AND WHERE THEY ARE AVAILABLE

Oregon Revised Statutes and Administrative Rules

STATEMENT IDENTIFYING HOW ADOPTION OF RULE(S) WILL AFFECT RACIAL EQUITY IN THIS STATE

There is no impact on racial equity for these changes.

FISCAL AND ECONOMIC IMPACT:

There is no fiscal impact anticipated for these changes.

COST OF COMPLIANCE:

(1) Identify any state agencies, units of local government, and members of the public likely to be economically affected by the rule(s). (2) Effect on Small Businesses: (a) Estimate the number and type of small businesses subject to the rule(s); (b) Describe the expected reporting, recordkeeping and administrative activities and cost required to comply with the rule(s); (c) Estimate the cost of professional services, equipment supplies, labor and increased administration required to comply with the rule(s).

No cost is expected for small businesses or other members of the public. No Expected costs for professional services, equipment supplies, labor or increased administration.

DESCRIBE HOW SMALL BUSINESSES WERE INVOLVED IN THE DEVELOPMENT OF THESE RULE(S):

Small Businesses are not involved with these rule changes.

WAS AN ADMINISTRATIVE RULE ADVISORY COMMITTEE CONSULTED? YES

RULES PROPOSED:

337-001-0000, 337-001-0005, 337-001-0025, 337-001-0050, 337-010-0006, 337-010-0007, 337-010-0008, 337-010-0009, 337-010-0010, 337-010-0011, 337-010-0017, 337-010-0025, 337-010-0026, 337-010-0030, 337-010-0033, 337-010-0037, 337-010-0045, 337-010-0046, 337-020-0015, 337-021-0073, 337-030-0001, 337-030-0002, 337-030-0005, 337-030-0010, 337-030-0015, 337-030-0020, 337-030-0025

AMEND: 337-001-0000

RULE SUMMARY: Updates rule for current practices

CHANGES TO RULE:

337-001-0000

Notice of Proposed Rule ¶¶

Prior to the adoption, amendment, or repeal of any rule, the Oregon Board of Medical Imaging must give notice of the proposed adoption, amendment, or repeal:¶¶

(1) In the Secretary of State's Bulletin referred to in ORS 183.360 at least 215 days prior to the effective date.¶¶

(2) By ~~mail~~providing a copy of the Notice to persons on the Board's mailing list established pursuant to ORS 183.335(~~6~~;~~8~~) at least 28 days prior to the effective date.¶¶

(3) By distributing a copy of the Notice to the following persons, organizations, or publications:¶¶

(a) American Registry of Radiologic Technologists;¶¶

(b) American Society of Radiologic Technologists;¶¶

(c) Oregon Society of Radiologic Technologists;¶¶

(d) Oregon Medical Association;¶¶

(e) Oregon Association of Hospitals;¶¶

(f) Oregon Association of Chiropractic Physicians;¶¶

(g) Oregon Association of Naturopathic Physicians;¶¶

(h) Oregon Osteopathic Association;¶¶

(i) Oregon Podiatry Association;¶¶

(j) Society of Nuclear Medicine;¶¶

(k) Pacific Northwest Society of Nuclear Medicine Technologists' Section;¶¶

(l) American Registry for Diagnostic Medical Sonography;¶¶

(m) American Society of Echocardiography;¶¶

(n) Cardiovascular Credentialing International;¶¶

(o) Society for Vascular Surgery;¶¶

(p) Society for Vascular Ultrasound;¶¶

(q) Society of Diagnostic Medical Sonography;¶¶

(r) Society of Invasive Cardiovascular Professionals;¶¶

(s) American Registry of Magnetic Resonance Imaging Technologists.

Statutory/Other Authority: ORS ~~183~~688.555

Statutes/Other Implemented: ORS 355

AMEND: 337-001-0005

RULE SUMMARY: Amends rule for current practices

CHANGES TO RULE:

337-001-0005

Model Rules of Practice ¶

~~The Uniform and Model Rules of Procedure under the Administrative Procedures Act, dated January 1, 2008 as promulgated by the Attorney General of the State of Oregon, are by this reference adopted as the rules of practice and procedure of the Board of Medical Imaging and will be~~
Pursuant to ORS 183.341, the Oregon Board of Medical Imaging adopts the Attorney General's Uniform and Model Rules of Procedure in effect on January 1, 2023. These rules are controlling except as otherwise required by statute or rule. ¶

[ED. NOTE: The full text of the Attorney General's Model Rules of Procedure is available from the office of the Attorney General or Board of Radiologic Technology.]

Statutory/Other Authority: ~~ORS 171, 183, 688.555(1)~~

Statutes/Other Implemented: ORS 183.341

RULE SUMMARY: This rule is no longer needed

CHANGES TO RULE:

~~337-001-0025~~

~~Confidentiality and Inadmissibility of Mediation Communication~~

- ~~(1) The words and phrases used in this rule have the same meaning as given to them in ORS 36.110 and 36.234.¶~~
- ~~(2) Nothing in this rule affects any confidentiality created by other law. Nothing in this rule relieves a public body from complying with the Public Meetings Law, ORS 192.610 to 192.690. Whether or not they are confidential under this or other rules of the agency, mediation communications are exempt from disclosure under the Public Records Law to the extent provided in 192.410 to 192.505.¶~~
- ~~(3) This rule applies only to mediations in which the agency is a party or is mediating a dispute as to which the agency has regulatory authority. This rule does not apply when the agency is acting as the "mediator" in a matter in which the agency also is a party as defined in ORS 36.234.¶~~
- ~~(4) To the extent mediation communications would otherwise be compromise negotiations under ORS 40.190 (OEC Rule 408), those mediation communications are not admissible as provided in 40.190 (OEC Rule 408), notwithstanding any provisions to the contrary in section (9) of this rule.¶~~
- ~~(5) Mediations Excluded. Sections (6) - (10) of this rule do not apply to:¶~~
- ~~(a) Mediation of workplace interpersonal disputes involving the interpersonal relationships between this agency's employees, officials or employees and officials, unless a formal grievance under a labor contract, a tort claim notice or a lawsuit has been filed; or¶~~
- ~~(b) Mediation in which the person acting as the mediator will also act as the hearings officer in a contested case involving some or all of the same matters;¶~~
- ~~(c) Mediation in which the only parties are public bodies;¶~~
- ~~(d) Mediation involving two or more public bodies and a private party if the laws, rule or policies governing mediation confidentiality for at least one of the public bodies provide that mediation communications in the mediation are not confidential;¶~~
- ~~(e) Mediation involving 15 or more parties if the agency has designated that another mediation confidentiality rule adopted by the agency may apply to that mediation; or¶~~
- ~~(6) Disclosures by Mediator. A mediator may not disclose or be compelled to disclose mediation communications in a mediation and, if disclosed, such communications may not be introduced into evidence in any subsequent administrative, judicial or arbitration proceeding unless:¶~~
- ~~(a) All the parties to the mediation and the mediator agree in writing to the disclosure; or¶~~
- ~~(b) The mediation communication may be disclosed or introduced into evidence in a subsequent proceeding as provided in subsections (c) - (d), (j) - (l) or (o) - (p) of section (9) of this rule.¶~~
- ~~(7) Confidentiality and Inadmissibility of Mediation Communications. Except as provided in sections (8) - (9) of this rule, mediation communications are confidential and may not be disclosed to any other person, are not admissible in any subsequent administrative, judicial or arbitration proceeding and may not be disclosed during testimony in, or during any discovery conducted as part of a subsequent proceeding, or introduced as evidence by the parties or the mediator in any subsequent proceeding.¶~~
- ~~(8) Written Agreement. Section (7) of this rule does not apply to a mediation unless the parties to the mediation agree in writing, as provided in this section, that the mediation communications in the mediation will be confidential and/or nondiscoverable and inadmissible. If the mediator is the employee of and acting on behalf of a state agency, the mediator or an authorized agency representative must also sign the agreement. The parties' agreement to participate in a confidential mediation must be in substantially the following form. This form may be used separately or incorporated into an "agreement to mediate." [Form not included. See ED. NOTE.]¶~~
- ~~(9) Exceptions to confidentiality and inadmissibility:¶~~
- ~~(a) Any statements, memoranda, work products, documents and other materials, otherwise subject to discovery that were not prepared specifically for use in the mediation are not confidential and may be disclosed or introduced into evidence in a subsequent proceeding.¶~~
- ~~(b) Any mediation communications that are public records, as defined in ORS 192.410(4), and were not specifically prepared for use in the mediation are not confidential and may be disclosed or introduced into evidence in a subsequent proceeding unless the substance of the communication is confidential or privileged under state or federal law.¶~~
- ~~(c) A mediation communication is not confidential and may be disclosed by any person receiving the communication to the extent that person reasonably believes that disclosing the communication is necessary to prevent the commission of a crime that is likely to result in death or bodily injury to any person. A mediation communication is not confidential and may be disclosed in a subsequent proceeding to the extent its disclosure~~

may further the investigation or prosecution of a felony crime involving physical violence to a person.¶¶

(d) Any mediation communication related to the conduct of a licensed professional that is made to or in the presence of a person who, as a condition of his or her professional license, is obligated to report such communication by law or court rule is not confidential and may be disclosed to the extent necessary to make such a report.¶¶

(e) The parties to the mediation may agree in writing that all or part of the mediation communications are not confidential or that all or part of the mediation communications may be disclosed and may be introduced into evidence in a subsequent proceeding unless the substance of the communication is confidential, privileged or otherwise prohibited from disclosure under state or federal law.¶¶

(f) A party to the mediation may disclose confidential mediation communications to a person if the party's communication with that person is privileged under ORS Chapter 40 or other provision of law. A party to the mediation may disclose confidential mediation communications to a person for the purpose of obtaining advice concerning the subject matter of the mediation, if all the parties agree.¶¶

(g) An employee of the agency may disclose confidential mediation communications to another agency employee so long as the disclosure is necessary to conduct authorized activities of the agency. An employee receiving a confidential mediation communication under this subsection is bound by the same confidentiality requirements as apply to the parties to the mediation.¶¶

(h) A written mediation communication may be disclosed or introduced as evidence in a subsequent proceeding at the discretion of the party who prepared the communication so long as the communication is not otherwise confidential under state or federal law and does not contain confidential information from the mediator or another party who does not agree to the disclosure.¶¶

(i) In any proceeding to enforce, modify or set aside a mediation agreement, a party to the mediation may disclose mediation communications and such communications may be introduced as evidence to the extent necessary to prosecute or defend the matter. At the request of a party, the court may seal any part of the record of the proceeding to prevent further disclosure of mediation communications or agreements to persons other than the parties to the agreement.¶¶

(j) In an action for damages or other relief between a party to the mediation and a mediator or mediation program, mediation communications are not confidential and may be disclosed and may be introduced as evidence to the extent necessary to prosecute or defend the matter. At the request of a party, the court may seal any part of the record of the proceeding to prevent further disclosure of the mediation communications or agreements.¶¶

(k) When a mediation is conducted as part of the negotiation of a collective bargaining agreement, the following mediation communications are not confidential and such communications may be introduced into evidence in a subsequent administrative, judicial or arbitration proceeding:¶¶

(A) A request for mediation; or¶¶

(B) A communication from the Employment Relations Board Conciliation Service establishing the time and place of mediation; or¶¶

(C) A final offer submitted by the parties to the mediator pursuant to ORS 243.712; or¶¶

(D) A strike notice submitted to the Employment Relations Board.¶¶

(l) To the extent a mediation communication contains information the substance of which is required to be disclosed by Oregon statute, other than ORS 192.410 to 192.505, that portion of the communication may be disclosed as required by statute.¶¶

(m) Written mediation communications prepared by or for the agency or its attorney are not confidential and may be disclosed and may be introduced as evidence in any subsequent administrative, judicial or arbitration proceeding to the extent the communication does not contain confidential information from the mediator or another party, except for those written mediation communications that are:¶¶

(A) Attorney-client privileged communications so long as they have been disclosed to no one other than the mediator in the course of the mediation or to persons as to whom disclosure of the communication would not waive the privilege; or¶¶

(B) Attorney work product prepared in anticipation of litigation or for trial; or¶¶

(C) Prepared exclusively for the mediator or in a caucus session and not given to another party in the mediation other than a state agency; or¶¶

(D) Prepared in response to the written request of the mediator for specific documents or information and given to another party in the mediation; or¶¶

(E) Settlement concepts or proposals, shared with the mediator or other parties.¶¶

(n) A mediation communication made to the agency may be disclosed and may be admitted into evidence to the extent the Board determines that disclosure of the communication is necessary to prevent or mitigate a serious danger to the public's health or safety, and the communication is not otherwise confidential or privileged under state or federal law.¶¶

(o) The terms of any mediation agreement are not confidential and may be introduced as evidence in a subsequent

proceeding, except to the extent the terms of the agreement are exempt from disclosure under ORS 192.410 to 192.505, a court has ordered the terms to be confidential under ORS 30.402 or state or federal law requires the terms to be confidential.¶¶

(p) The mediator may report the disposition of a mediation to the agency at the conclusion of the mediation so long as the report does not disclose specific confidential mediation communications. The agency or the mediator may use or disclose confidential mediation communications for research, training or educational purposes, subject to the provisions of ORS 36.232(4).¶¶

(10) When a mediation is subject to section (7) of this rule, the agency will provide to all parties to the mediation and the mediator a copy of this rule or a citation to the rule and an explanation of where a copy of the rule may be obtained. Violation of this provision does not waive confidentiality or inadmissibility.¶¶

[ED. NOTE: Forms referenced are available from the agency.]

Statutory/Other Authority: ORS 36.224

Statutes/Other Implemented: ORS 36.224, 36.228, 36.230, 36.232

ADOPT: 337-001-0050

RULE SUMMARY: Provides for time frame and process regarding contested case hearings

CHANGES TO RULE:

337-001-0050

Time for Requesting a Contested Case Hearing

A request for a contested case hearing must be in writing and must be received by the Board within twenty one (21) days from the date the proposed notice of disciplinary action was served.

Statutory/Other Authority: ORS 688.555

Statutes/Other Implemented: ORS 183

RULE SUMMARY: Revise for clarity

CHANGES TO RULE:

337-010-0006

Definitions ¶

For purposes of ORS 688.405 to 688.6020; 688.915 and these rules:¶

- (1) The "Practice of Medical Imaging" shall be defined as but not limited to the use of ionizing radiation, ultrasound, radio waves or magnetic fields upon human anatomy for diagnostic or therapeutic purposes including the physical positioning of the patient, the determination of exposure parameters, the handling of the ionizing radiation equipment and workplace conduct.¶
- (2) "Advanced Practice Registered Nurse" means a person who is licensed in accordance with ORS 678.025¶
- (3) "Application" means documentation submitted to the Board for a license or permit, including the Board's application form and any required documentation that is specified in the application instructions. An application is considered incomplete if the form or any of the required documentation or fees are not provided. An incomplete application is deemed to be voluntarily withdrawn six months from the date of receipt in the Board office.¶
- (4) "Approved school" means a school accredited in one of the medical imaging modalities or subspecialties by a national or regional post-secondary accreditation body and whose graduates are qualified to sit for a credentialing examination recognized by the Board of Medical Imaging in the graduate's medical imaging modality or subspecialty.¶
- (5) "Board" means Board of Medical Imaging.¶
- (6) "Clinical instructor" means an individual assigned to supervise students in a clinical setting who is:¶
 - (a) A licensed physician who routinely supervises the medical imaging modality being studied by a student; or¶
 - (b) An individual who holds a current and valid licensed by the board and who is credentialed by a board approved credentialing organization in the medical imaging modality being studied by a student.¶
- (7) "Credential" means the recognition awarded to an individual who meets the requirements of a credentialing organization.¶
- (8) "Credentialing organization" means a nationally recognized organization that issues credentials through testing or evaluations that determine that a person meets defined standards for training and competence in a medical imaging modality.¶
- (9) "Diagnostic medical sonography" means the use of nonionizing high frequency sound waves with specialized equipment to direct the sound waves into areas of the human body to generate images for the assessment and diagnosis of various medical conditions.¶
- (10) "Direct supervision" means that the supervisor is physically present in the building and immediately available to furnish assistance as needed.¶
- (11) "Extremity Computed Tomography Machine" (ECT) means a machine that is specifically designed, with a maximum setting of 120kVp at 60 mAs, to perform computed tomography (CT) exams on extremities only. For the purpose of extremity computed tomography only, "extremity" includes the following body parts:¶
 - (a) Lower extremities including: toe; foot; calcaneus; ankle; tibia; fibula; knee; patella; and distal femur.¶
 - (b) Upper extremities including: finger; hand; wrist; forearm; elbow; and distal humerus.¶
- (112) "Fluoroscopy" means a technique for generating X-ray images and for presenting the X-ray images simultaneously and continuously as a visible image.¶
- (123) "General supervision" means that the supervisor is not required to be on-site, but must be available for direct communication, either in person, by telephone, or other electronic means.¶
- (14) "Graduate" means an individual who has completed the didactic and clinical education at an approved school, including documented clinical proficiency, but who has not met all requirements for credentialing by a credentialing organization.¶
- (135) "Hybrid imaging or radiation therapy equipment" means equipment that combines more than one medical imaging modality into a single device.¶
- (146) "Ionizing radiation" means alpha particles, beta particles, gamma rays, X-rays, neutrons, high-speed electrons, high-speed protons or other particles capable of producing ions. "Ionizing radiation" does not include radiation such as radiofrequency or microwaves, visible, infrared or ultraviolet light or ultrasound.¶
- (157) "License" means a license issued by the Board to practice one or more of the medical imaging modalities.¶
- (168) "Licensed nurse practitioner" means a nurse practitioner licensed in Oregon.¶
- (179) "Licensed physician" means a physician or surgeon licensed in Oregon.¶
- ~~(18 as defined by the Oregon Medical Board.~~ ¶
- (20) "Licensed physician assistant" means a physician assistant licensed in Oregon.¶

(219) "Licensed Advanced Practice Registered Nurse" means an advanced practice registered nurse licensed in Oregon.¶

(202) "Limited X-ray machine operator" means a person other than a licensed physician who performs diagnostic X-ray procedures under the supervision of a licensed physician, a licensed nurse practitioner or a licensed physician assistant using equipment that emits external ionizing radiation resulting in diagnostic radiographic images that are limited to select human anatomical sites.¶

(213) "Limited X-ray machine operator course of study" means a Board-approved set of didactic and clinical experience elements designed to prepare a person for gaining practical experience and for passing the limited X-ray machine operator examination.¶

(224) "Magnetic resonance imaging" means the process by which certain nuclei, when placed in a magnetic field, absorb and release energy in the form of radio waves that are analyzed by a computer thereby producing an image of human anatomy and physiological information.¶

(235) "Medical physicist" is a person who is certified in diagnostic radiological physics or radiological physics by the American Board of Radiology, or in diagnostic imaging physics by the American Board of Medical Physics, or in diagnostic radiology physics by the Canadian College of Physicists in Medicine.¶

(246) "Medical imaging" means the use of specialized equipment ~~for the production of~~ to produce visual representations of human anatomy, tissues or organs for use in clinical diagnosis and treatment and includes but is not limited to X-ray, single photon emission, positron emission technology, ultrasound, magnetic fields, visible light and radio waves.¶

(257) "Medical imaging licensee" means a person other than a licensed physician or a limited X-ray machine operator who holds a valid license and operates medical imaging equipment for diagnostic or therapeutic purposes under the supervision of a licensed physician.¶

(268) "Medical imaging modality" means:¶

- (a) Diagnostic medical sonography and all its subspecialties;¶
- (b) Magnetic resonance imaging and all its subspecialties;¶
- (c) Nuclear medicine technology and all its subspecialties;¶
- (d) Radiation therapy and all its subspecialties; or¶
- (e) Radiography and all its subspecialties.¶

(279) "Nuclear medicine technology" means the specialized equipment that measures radiation emitted by radionuclides, including counters and cameras that form medical images for interpretation by a physician, or assists in therapeutic use of radionuclides.¶

(2830) "Personal supervision" means that the supervisor is always physically present in the room during the performance of the procedure.¶

(31) "Physician Assistant" means a person who is licensed in accordance with ORS 677.505 to 677.525.¶

(329) "Radiographer" means a person other than a licensed physician who performs a comprehensive set of diagnostic radiographic procedures under the supervision of a licensed physician using external ionizing radiation to produce radiographic, fluoroscopic or digital images.¶

(303) "Radiography" means the use of ionizing radiation to produce radiographic, fluoroscopic or digital images of human anatomy for diagnostic purposes.¶

(314) "Radiologist" means a person licensed to practice medicine in the State of Oregon who is certified by or board eligible for certification by the American Board of Radiology, the American Osteopathic Association, the Royal College of Radiologists or the Royal College of Physicians and Surgeons of Canada.¶

(325) "Student" means an individual enrolled in:¶

- (a) An approved school, college or university academic training program in medical imaging; or¶
- (b) A limited X-ray machine operator course of study.¶

(336) "Supervision" means the act of monitoring and reviewing the performance of medical imaging licensees or limited X-ray machine operators through regular inspections of work produced, regardless of whether the supervising individual is continuously physically present during the performance or use of medical imaging equipment or X-ray equipment.¶

(347) "Positioning" is the act of placing the patient in the standard or appropriate position for a medical imaging examination or radiation therapy based on the medical condition of patient.¶

(38) "Waiver" means that the Board may prescribe terms for a licensure waiver, including but not limited to: time duration of the waiver; supervisory requirements; and clinical experience requirements. The waiver may include deadlines for completing specified requirements included in the waiver. The Board may grant a preliminary waiver conditioned upon the waiver applicant's completion of all Board-specified waiver requirements.

Statutory/Other Authority: ORS 183.310(7), 688.555
 Statutes/Other Implemented: ORS 688.415 - 688.605, 688.915

AMEND: 337-010-0007

RULE SUMMARY: revised for clarity

CHANGES TO RULE:

337-010-0007

Recognized Credentialing Organizations and Credentials ¶¶

Licenses will recognize credentials by listing a licensee's major modality and all sub-specialties for which a licensee is currently certified. Currently recognized subspecialties are listed as follows under each credentialing organization:¶¶

(1) American Registry for Diagnostic Medical Sonographers (ARDMS)¶¶

(a) Registered Diagnostic Medical Sonographer - RDMS¶¶

(b) Registered Diagnostic Cardiac Sonographer - RDCS¶¶

(c) Registered Vascular Technologist - RVT¶¶

(d) Registered Musculoskeletal Sonographer - RMSKS¶¶

(e) The following specializations, that are subject to change, under the main categories above will also be listed as provided by the ARDMS and recognized as for example as: John Doe, RDMS (AB, OB), RDCS (AE, PE):¶¶

(A) AB - Abdomen.¶¶

(B) AE - Adult Echocardiography.¶¶

(C) BR - Breast Specialty.¶¶

(D) FE - Fetal Echocardiography.¶¶

(E) MSKS - Musculoskeletal Sonographer.¶¶

(F) NE - Neurosonology.¶¶

(G) OB - Obstetrics & Gynecology.¶¶

(H) PE - Pediatric Echocardiography.¶¶

(I) VT - Vascular Technology.¶¶

(J) PS - Pediatric Sonography.¶¶

(2) American Registry of Magnetic Resonance Imaging Technologists (ARMRIT) Primary designation: MRI. There are no sub-specialties and is recognized as for example: John Doe MRIT (ARMRIT).¶¶

(3) American Registry of Radiologic Technologists (ARRT). An ARRT certificate confers upon its holder the right to use the title "Registered Technologist" and its abbreviation "R.T.(ARRT)" or "Registered Radiologist Assistant" and its abbreviation "R.R.A. (ARRT)" in connection with licensee's name as long as the registration of the certificate is in effect. The category designation should be inserted between the "R.T." and the "(ARRT)" and should be shown as "R.T. (*) (ARRT)" where the asterisk is replaced by the letter or letters are recognized as for example: Joe Doe RT (R) (ARRT) and indicated in the following list:¶¶

(a) (R) For Radiography.¶¶

(b) (N) For Nuclear Medicine Technology.¶¶

(c) (T) For Radiation Therapy.¶¶

(d) (MR) For Magnetic Resonance Imaging.¶¶

(e) (S) For Sonography.¶¶

(f) (CV) For Cardiovascular-Interventional Radiography.¶¶

(g) (M) For Mammography.¶¶

(h) (CT) For Computed Tomography.¶¶

(i) (QM) for Quality Management.¶¶

(j) (BD) For Bone Densitometry.¶¶

(k) (VS) For Vascular Sonography.¶¶

(l) (CI) For Cardiac-Interventional Radiography.¶¶

(m) (VI) For Vascular-Interventional Radiography.¶¶

(n) (BS) For Breast Sonography.¶¶

(4) Certification Board of Radiology Practitioner Assistants (CBRPA) "Radiology Practitioner Assistant" (R.P.A.) An RPA means an American Registry of Radiologic Technologists (A.R.R.T.) technologist who has successfully completed an advanced training program and is certified by the CBRPA and will be recognized for example: Jane Doe RT (ARRT) (RPA) (CBRPA).¶¶

(5) Cardiovascular Credentialing International (CCI) credentials are recognized as for example: Jane Doe RCES (CCI) and are indicated in the following list:¶¶

(a) ACS - Sonography - Advanced Cardiac Sonographer.¶¶

(b) CCT - Angiography - Certified Cardiographic Technician.¶¶

(c) RCCS - Sonography - Registered Congenital Cardiac Sonographer.¶¶

(d) RCES - Angiography - Registered Cardiac Electrophysiology Specialist.¶¶

(e) RCIS - Angiography - Registered Cardiovascular Invasive Specialist.¶¶

(f) RCS - Sonography - Registered Cardiac Sonographer.¶¶

(g) RPhS - Sonography - Registered Phlebology Sonographer.¶¶

(h) RVS - Sonography - Registered Vascular Specialist.¶¶

(6) Nuclear Medicine Technology Certification Board (NMTCB) Primary certification: Nuclear Medicine Technologist - CNMT. The following Sub-specialties are recognized as for example: John Doe NMT, NCT (NMTCB) and are indicated in the following list:¶¶

(a) Nuclear Cardiology - NCT.¶¶

(b) Positron Emission Tomography - PET.¶¶

(c) Computed Tomography - CT.

Statutory/Other Authority: ORS 688.555(1)

Statutes/Other Implemented: ORS 688.425(1)

AMEND: 337-010-0008

RULE SUMMARY: revised for clarity

CHANGES TO RULE:

337-010-0008

Change of Contact Information ¶¶

(1) Every licensee or permit holder, whether active, pending or sanctioned, shall maintain on file with the Board correct current contact information including: telephone number, email address, residence address, employer and full name. ¶¶

(2) Every licensee or permit holder must notify the board within 30 days of any changes to the contact information. ¶¶

(3) Agency notice by mail, whether registered, certified, or regular, to the licensee's or permit holder current mailing address on file with the board constitutes service on the licensee. A Notice of Proposed Disciplinary Action sent to the licensee or permit holder at the licensee's or permit holder address of record by certified mail or registered mail is sufficient notice even if the licensee or permit holder fails to or refuses to respond to the service or never receives the Notice. Such mailing permits the Board to proceed with disciplinary action in the absence of a request for a hearing.

Statutory/Other Authority: ORS 688.555(1)

Statutes/Other Implemented: ORS 688.525(1)

AMEND: 337-010-0009

RULE SUMMARY: revised for clarity

CHANGES TO RULE:

337-010-0009

Change of Credentialing or License Status ¶¶

Every licensee or permit holder must:¶¶

- (1) Maintain credentialing in their licensed specialty throughout the licensure period.¶¶
- (2) Notify the Board within 30 days of any issuance of any pending or final actions against the licensee or permit holder by the credentialing organization. ¶¶
- (3) Notify the Board within 30 days of lapse or suspension of any professional license.

Statutory/Other Authority: ORS 688.555(1)

Statutes/Other Implemented: ORS 688.455

AMEND: 337-010-0010

RULE SUMMARY: revise for appropriate statute

CHANGES TO RULE:

337-010-0010

Qualifications of Radiographer in Diagnostic Field ¶

In addition to those qualifications set out in ORS 688.465, applicants for licensure as a radiologic technologist in the diagnostic field must submit evidence of current credentialing by the American Registry of Radiologic Technologists (ARRT) in radiography. The Board will verify current credential status through review of the ARRT directory. If the applicant is not listed in the current ARRT directory, the applicant must request written verification from the ARRT and have the current credential directly submitted to the Board by the ARRT.

Statutory/Other Authority: ORS 688 ORS 688.555(1)

Statutes/Other Implemented: ORS 688.455

337-010-0011

Qualifications of Computed Tomography Equipment Operators and Merged Technology Equipment Operators Licensing ¶¶

(1)(a) Diagnostic Computed Tomography: A licensee who operates computed tomography (CT) equipment, including cone beam CT for diagnosis, must be credentialed in Computed Tomography (CT) by either the American Registry of Radiologic Technologists or the Nuclear Medicine Technology Certification Board or have an active temporary CT license issued by OBMI.¶¶

(b) Notwithstanding Paragraph (1), a licensee, with a radiography credential from the American Registry of Radiologic Technologists (ARRT), may operate an Extremity Computed Tomography (ECT) machine without having earned a computed tomography credential.¶¶

(2) Computed Tomography/Nuclear Medicine Hybrid Imaging: Positron Emission-Computed Tomography (PET/CT) or Single Photon Emission-Computed Tomography (SPECT/CT) systems must be operated by technologists with the active credentials R.T.(N) or CNMT(NMTCB) and licensed by the Oregon Board of Medical Imaging (OBMI).¶¶

(a) A registered radiographer with the credential R.T. (R), or a registered radiation therapist with the credential R.T. (T): ¶¶

(A) May only operate CT for localization; and ¶¶

(B) May not operate CT for diagnostic purposes; and¶¶

(C) May operate the diagnostic portion of the CT hybrid imager if they hold a CT credential from ARRT, or have an active temporary CT license issued by OBMI.¶¶

(b) Registered certified nuclear medicine technologists with the active credentials R.T. (N) or CNMT (NMTCB) may operate SPECT and PET with non-diagnostic CT and the attenuation correction portion of the hybrid imager. Registered Certified Nuclear Medicine technologists that hold a CT credential or have an active temporary CT license issued by OBMI, may operate the diagnostic portion of the CT scanner. ¶¶

(3) Computed Tomography for Radiation Therapy Treatment Planning Purposes: A licensee who operates CT equipment for radiation therapy treatment planning purposes must be credentialed in Radiation Therapy or CT by the ARRT or the Nuclear Medicine Technology Certification Board (NMTCB).¶¶

(4) On a case-by-case basis, the Board may waive a credential requirement of this rule for a licensed technologist, based upon the Board's determination that the following two conditions are met:¶¶

(a) The licensee seeking a waiver:¶¶

(A) Has substantial experience practicing computed tomography, as determined by the Board; and¶¶

(B) Seeks to perform computed tomography as an employee or contractor of a specified rural hospital, as defined in ORS 442.470; and¶¶

(C) Under state sponsorship, passes a computed tomography examination by a registry recognized by the Board; and¶¶

(D) Must have completed and documented vendor-provided applications training specific to any CT machine the waiver applicant will work on; and¶¶

(E) Must have completed a minimum of 16 hours in structured CT education requirements, as recognized by the Board, within the 24 months prior to applying for the waiver; and¶¶

(F) Meets clinical experience requirements as specified in the waiver; and¶¶

(G) Must have completed five supervised diagnostic-quality repetitions of any anatomic area that the waiver recipient will image with computed tomography. The waiver will only be applicable to cover images of anatomic areas for which the waiver recipient has met this requirement. Supervision must be provided by a licensed technologist with a CT registry credential recognized by the Board.¶¶

(b) Failure to grant the waiver would result in a substantial shortage in the rural hospital's ability to deliver necessary health services to the community.¶¶

(5) The Board may prescribe terms of the waiver, including but not limited to: time duration of the waiver; supervisory requirements; and clinical experience requirements. The waiver may include deadlines for completing specified requirements included in the waiver. Within no more than 100 days from the date the applicant submits an initial waiver request, the Board may grant a preliminary waiver conditioned upon the waiver applicant's completion of all Board-specified waiver requirements rule definitions in OAR 337-010-0006.

Statutory/Other Authority: ORS 688.555(1)

Statutes/Other Implemented: ORS 688.480

ADOPT: 337-010-0017

RULE SUMMARY: Provides a rule for the use of hybrid imaging or radiation equipment where more than one modality is used to produce images or is used for therapy.

CHANGES TO RULE:

337-010-0017

Hybrid Imaging

Persons who operate hybrid imaging or radiation therapy equipment that incorporates more than one medical imaging modality can only operate the functions of the machine for the medical imaging modality that the person is both credentialed and licensed to use. Temporary Post-Primary license holders may operate hybrid imaging or radiation therapy equipment in the medical imaging modality related to their valid temporary post-primary license under personal supervision, without holding a credential in that modality.

Statutory/Other Authority: ORS 688.555

Statutes/Other Implemented:

AMEND: 337-010-0025

RULE SUMMARY: revise for clarity and CE current practices

CHANGES TO RULE:

337-010-0025

Continuing Education ¶

(1) Licensees must comply with all continuing education and continuing competency requirements of the applicable credentialing organization by submitting their annual registration.¶

(2) Continuing education programs authorized by a Board approved credentialing organization, are approved by the Board to meet the requirements of ORS 688.505.

Statutory/Other Authority: ORS 688.555(1)

Statutes/Other Implemented: ORS 688.505

AMEND: 337-010-0026

RULE SUMMARY: revise for clarity

CHANGES TO RULE:

337-010-0026

Permit Renewal ¶¶

(1) Permit holders must submit evidence of continuing education (CE) on an application for permit renewal. A permanent initial Limited X-ray Machine Operator (LXMO) permit that is prorated for a period of less than 24 months requires one hour of continuing education per month, depending on the number of anatomic areas designated on the limited permit.¶¶

(2) Permit holders must obtain a minimum of continuing education hours according to the following schedule:¶¶

(a) One to three LXMO anatomic areas requires 9 hours of CE per year or 18 hours for a 2-year renewal.¶¶

(b) Four or more LXMO anatomic areas requires 12 hours of CE per year or 24 hours for a 2-year renewal.¶¶

(3) The Board may require permit holders to produce documents verifying continuing education activities for purposes of an audit by the Board. Permit holders are required to retain verification documents for a period of two years following the renewal date. At any time during that two two years the Board may require permit holders to produce those documents for purposes of an audit by the Board.¶¶

(4) ~~Verification Documents for Renewal Applicants include:¶¶~~

~~(a) A completed OMBI worksheet, listing all continuing eContinuing Education aActivities performed during the immediately preceding licensing period.¶¶~~

~~(b) All renewal applicants are subject to audit of their Continuing Education hours by the Board.¶¶~~

~~(5) Acceptable Types of Continuing Education Activities:¶¶~~

~~(a) Any independent reading, video or audio education must include a pre-approved post-test in order to be acceptable for complying with OMBI's continuing education requirements.¶¶~~

~~(b) Acceptable forms of continuing education activities for permit holders, with one hour of credit for each hour spent in the activity include:¶¶~~

~~(A) Attendance at educational portions of professional organizations meetings that are directly appropriate to the modality practiced by the permit holder.¶¶~~

~~(B) shall be directly appropriate to the anatomical areas practiced by the permit holder and include: independent or directed reading of professional and scientific journals and newsletters appropriate to the modality practiced by the permit holder, listening to or viewing video recordings appropriate to the modality practiced by the permit holder, all of which include a post-test.¶¶~~

~~(C) Symposia, workshops, lectures, refresher courses, correspondence courses, or other Board-accepted CE that is appropriate to the modality practiced by the permit holder.¶¶~~

~~(D) In-service education when appropriate to the modality practiced by the permit holder; video or audio education with an associated post-test; attendance to educational portions of professional organizations meetings; symposia, workshops, lectures, refresher courses, correspondence courses, or other Board accepted CE; in-service education.¶¶~~

~~(Ea) For LXMO permit holders, a minimum of one hour of approved CE in one permit area is required per year and 2 hours of either radiation use and safety or radiographic technique is required per year.¶¶~~

~~(65) Limited X-ray Machine Operator (LXMO) permit renewal requirements following 24-month lapse: A LXMO permit holder with a permit that is expired for a period in excess of 24 continuous months must complete all of the following within the one-year time frame specified in this section. The application process and fee structure under this section follows the rules outlined under OAR 337-010-0030:¶¶~~

~~(a) A LXMO permit holder with a permit that is expired for a period in excess of 24 continuous months must:¶¶~~

~~(A) Apply for, take and pass the ARRT Limited Scope Examination in Diagnostic Radiologic Technology in CORE (referred to as CORE); and¶¶~~

~~(B) Take and pass the ARRT Limited Scope Examination in Diagnostic Radiologic Technology in any specific anatomic area or current anatomical equivalent listed on the most recently expired permit for which the new permit is desired; and ¶¶~~

~~(C) Apply for and obtain a Temporary Limited Permit in order to perform radiographic procedures for acquiring the required practical experience; and¶¶~~

~~(D) Obtain a signed certificate of completion of practical experience in the anatomical area(s) for which the permit is desired; and ¶¶~~

~~(E) Apply for and obtain a Permanent Limited Permit from the Oregon Board of Medical Imaging.¶¶~~

~~(F) The expired LXMO permit holder has twelve months to pass the ARRT exams in CORE and at least one anatomic area and apply for a permanent limited permit. The twelve months begin from the time the applicant first~~

takes the ARRT exam and ends with the date the permanent limited permit application is received by the Board.¶¶

(G) Passing the CORE exam and an anatomic area exam will qualify an applicant to apply for a temporary permit for that anatomic area.¶¶

(H) The expired permit holder is allowed three attempts to pass an individual exam provided the one-year time frame is adhered to.¶¶

(I) The required passing score is 70 percent.¶¶

(J) An applicant that does not pass the exams in CORE and an anatomic area listed on the most recently expired permit for which the new permit is desired within the one-year time frame, must follow the rules outlined under OAR 337-010-0030 for a new applicant, starting with retaking the CORE module course and didactic portion of the Radiographic Procedure Module and obtaining a new course completion certificate.¶¶

(K) Failure to pass CORE within the one-year time frame will negate a passing score on any anatomic area exam taken in accordance with this section.¶¶

(b) A Bone densitometry permit holder with a permit that is expired for a period in excess of 24 continuous months must complete all of the following in the time frames specified in this section:¶¶

(A) Apply for, take and pass the ARRT Bone Densitometry Exam. Bone Densitometry applicants are exempt from taking and passing the ARRT CORE examination in order to reapply for a permit expired for longer than 24 continuous months.¶¶

(B) Apply for and obtain a Permanent Limited Permit. Bone densitometry applicants do not need to apply for a temporary permit and do not need to complete practical experience in order to obtain a permanent limited permit following a 24-month lapse.¶¶

(C) The expired permit holder has twelve months to pass the ARRT Bone Densitometry Exam and apply for a permanent permit. The twelve months begin from the time the applicant first takes the ARRT exam and ends with the date the permanent permit application is received by the Board.¶¶

(D) The expired permit holder is allowed three attempts to pass the exam provided the one-year time frame is adhered to.¶¶

(E) The required passing score is 70 percent.¶¶

(F) An applicant that does not pass the exam within the one-year time frame, must follow the rules outlined under OAR 337-010-0030 for a new applicant, starting with a Board approved course of instruction including a new course completion certificate.¶¶

(c) Under this section, limited permit holders who received permits under the pre-2007 radiographic positioning can only be reinstated to practice using the current Board-approved radiographic positions, as follows: [Table not included. See ED. NOTE.] requirements to obtain an initial permanent LXMO permit under OAR 337-010-0030.

Statutory/Other Authority: ORS 688.555(1)

Statutes/Other Implemented: ORS 688.445, 688.505

RULE SUMMARY: Revise for clarity and Board approved time line changes

CHANGES TO RULE:

337-010-0030

Limited X-Ray Machine Operator (LXMO) Permits ¶¶

(1) Applicants for LXMO Permits Qualifications: An applicant for are required to complete multiple steps to obtain a Permanent LXMO Permit. An applicant for an Initial Permanent LXMO permit must provide evidence of and complete all of the following:¶¶

(a) An applicant for a LXMO permit must be at least 18 years of age; and¶¶

(b) Pay a non-refundable application fee; and¶¶

(c) Have successfully passed a within a 12-month period starting with the date on the course completion certificate from course of instruction that reflects the current Core Module of the "Content Specifications for the Examination for the Limited Scope of Practice in Radiography" published by the American Registry of Radiologic Technologists (ARRT) study that is approved by the Board and ending with the date of the Initial Permanent LXMO application:¶¶

(a) An applicant for a LXMO permit must be at least 18 years of age; and¶¶

(b) Pay a non-refundable application fee; and¶¶

(dc) Successfully attend a course of instruction which must be provided by a school that is approved by the Board and licensed by the Oregon Department of Education, Private Career School Section, or otherw, pass and obtain a signed course completion certificate from a course of study that: ise approved or accredited by the Oregon Department of Higher Education; and¶¶

(e) Attendby the Board; taught by a Bboard--approved school with a curriculum that consists of not less than 52 hours of instruction approved by the Board in all of the following subjects:¶¶

(A) Radiation physics;¶¶

(B) Interaction of radiation with matter;¶¶

(C) Radiation exposure, monitoring, and radiation units;¶¶

(D) Principle of the radiographic equipment;¶¶

(E) Biological effects of radiation;¶¶

(F) Low-dose techniquinstructor; includes Core module and at least one didactic portion of a Radiographic Procedure Module (and minimizing patient exposure;¶¶

(G) Applicable Federal and State radiation regulations;¶¶

(H) Quality assurance;¶¶

(I) Image critique;¶¶

(J) Personnel protection;¶¶

(K) Digital and computer-generated radiographic imaging;¶¶

(L) Developing and using technique charts; and¶¶

(M) Patient care.¶¶

(f) Have receivedatomic areas in: Skull/Sinus, Spine, Chest, Extremities, and/or Podiatric); includes a course of instruction in laboratory practice approved by the Board that satisfies all of the following criteria:¶¶

(A) Meeting the requirements stated in the Board's publication "Overview of Guidelines for Instructors of Courses in Preparation for the Limited Scope Examination in Diagnostic Radiologic Technology; includes all subjects outlined in the Board's "Limited X-Ray Machine Operator (LXMO) Instruction Manual" dated "DecemOctober 2019"23 which is incorporated by reference and made a part of this rule; and¶¶

(B) Reflects the current Radiographic Procedure Module(s) of the "Content Specifications for the Examination for the Limited Scope of Practice in Radiography" published by the American Registry of Radiologic Technologists.; and¶¶

(C) Taught by a board-approved instructor. "Limited X-Ray Machine Operator (LXMO) Instruction Manual" dated October 2023 is found on the OBMI website: <https://www.oregon.gov/obmi/Documents/LXMO-Instruction-Manual-current.pdf>; and¶¶

(Dd) Received the instructor's certification that the applicant has demonstrated all the positions and projections described in the Behavioral Objectives as part of the "Overview of Guidelines for Instructors of Courses in Preparation for the Limited Scope Examination in Diagnostic Radiologic Technology dated "December 2019" for each category. The minimum hours in each category are as follows:¶¶

(i) Skull/Sinus, 18 hours;¶¶

(ii) Spine, 30 hours;¶¶

(iii) Chest, 12 hours;¶¶

(iv) Extremities, 60 hours;¶

(v) Podiatric 10 hours.¶

(2) Process and timeframe for obtaining a limited x-ray permit: Provided an applicant has a valid course completion certificate as described in this rule, apply through OBMI, take, and pass with a score of at least 70 percent, the American Registry of Radiologic Technologists (ARRT) Limited Scope Examination in Diagnostic Radiologic Technology in CORE module. A passing score in CORE module is required to apply for a Temporary Initial LXMO Permit; and¶

(aA) Students currently enrolled in a Board-approved school may, up to 30 days prior to course completion, submit an application to the Board to sit for the ARRT Limited Scope Examination in Diagnostic Radiologic Technology. The application must include a statement from the school indicating that the applicant is a student in good standing and expected to graduate. The applicant may not sit for the ARRT examination prior to the date on the applicant's course completion certificate from the limited x-ray school. Apply through OBMI, take, and pass with a score of at least 70 percent, the ARRT Limited Scope Examination in Diagnostic Radiologic Technology Radiographic Procedure Module(s) in which the applicant passed in an approved course of study and wishes to include on the Permanent LXMO Permit¶

(bB) A graduate may qualify to sit for the ARRT Limited Scope Examination in Diagnostic Radiologic Technology by completing all of the following:¶

(A) Having successfully completed a Board-approved Core Module course; and¶

(B) Having successfully completed the didactic portion of a Radiographic Procedure Module (Skull/Sinus, Spine, Chest, Extremities, and/or Podiatric) relative to the anatomical area(s) for which the graduate wishes to be issued a permit.¶

(c) Graduate status begins on the date indicated on the student's course completion certificate. After 24 months, from the date indicated on the student's course completion certificate, graduate status is void and a person must retake the CORE person is allowed three attempts to pass an individual section of the ARRT exam during the 12-month time frame. Upon failure of the three attempts for CORE Module, all course work must be repeated, and a new course completion certificate is required for Core module course and didactic portion of the Radiographic Procedure Module as described in this section.¶

(d) A graduate has no longer than 12 months starting from the date on the course completion certificate and ending on the date the applicant's Temporary Initial LXMO Permit application is received by the Board to complete the following:¶

(A) Apply for, take and all Radiographic Procedure Module(s) regardless of a previous passing score for any individual Radiographic Procedure Module(s); and¶

(e)(A) Provided an applicant has passed the ARRT Limited Scope Examination in Diagnostic Radiologic Technology in CORE with a score of 70 percent or above; and¶

(B) Apply for examination in at least CORE Module, apply for and obtain a Temporary Initial LXMO Permit through OBMI. A Temporary Permit will only be issued for anatomic areas that the applicant successfully completed in school from an approved course of study, as reflected on the course completion certificate. A graduate person cannot perform a radiographic procedure on a patient without a temporary LXMO Permit. With a temporary LXMO Permit, a graduate person may only perform a radiographic procedure on the anatomic area(s) for which the Temporary LXMO Permit is valid;¶

(cB) A Graduate is allowed three attempts to pass the CORE section of the ARRT exam provided CORE is successfully passed within the one-year time frame.¶

(e) Graduates or Temporary Temporary Initial LXMO Permit holders may apply for the ARRT Limited Scope Examination in Diagnostic Radiologic Technology in the to renew a Temporary LXMO Permit in an anatomic area(s) in which the applicant passed in school and wishes to include on the Permanent Permit.¶

(f) order to have additional time to complete the practical experience requirements. A temporary LXMO permit holder has may be renewed one time and can extend no longer than the 12-months starting from the date on the Temporary Initial Limited Permit and ending on time frame outlined in this rule, starting with the date on the applicant's Permanent Initial LXMO Permit application is received by the Board to complete the following:¶

(A) Complete all practical experience requirements as documented by course completion certificate from a course of study that is approved by the Board; and¶

(f) Provided the applicant holds a valid temporary LXMO Permit, obtaining a signed practical experience certification form in all anatomic area(s) the permit holder wishes to an instructor's certification that the applicant has demonstrated on all the Permanent Limited Permit. The practical experience component must consist of experience with live patients with one of the following people present in the room during the radiographic exposures: a licensed radiographer; radiologist; or licensed physician, licensed nurse practitioner or licensed physician assistant with adequate training in radiography in accordance with RPS rules; or a person who has been actively taking radiographs under the authority of a positions, projections and requirements as described in the "Limited X-Ray Machine Operator (LXMO) Instruction Manual" dated October 2023 for each category; and¶

(g)(A) Provided an applicant has completed the above requirements, apply for Permanent Initial LXMO Permit through OBMI¶

(B) A Permanent LXMO pPermit within the immediate previous twelve months in the same anatomic area that is being imaged. Processed images made by the graduates are evaluated and critiqued by an Evaluator with one of the following credentials: an ARRT-registered, Oregon-licensed radiographer Practical Experience Evaluator; licensed radiographer; radiologist; licensed physician, licensed nll only be issued to applicants who have passed the ARRT CORE module exam, at least one Radiographic Procedure Module anatomic area and completed all required clinical experience. With a LXMO Permit, a person may only perform a radiographic procedure practitioner or licensed physician assistant with adequate training in radiography in accordance with RPS rules; or a person who has been actively taking radiographs under the authority of on the anatomic area(s) for which the LXMO Permit is valid¶

(2) In the event that a person is unable to complete all requirements to obtain a pPermanent LXMO pPermit within the immediate previous twelve 12 months. Th' time ggraduate shall be evaluated for imaging by using either the On-Site or Peer Positioning Practical Experience Evaluation Form developed by the Board. The Practical Experience Evaluator must provide the graduate with a certificate of completion in the categories in which the graduate has successfully completed practical experience; and¶

(B) Pass the ARRT exam in all anatomic area(s) the temporary permit holder wishes to have designated on the Permanent Limited Permit.¶

(C) Temporary Permit holders are allowed three attempts to pass an individual section of the ARRT exam within the 12-month time frame¶

(D) A temporary limited permit is required to complete the practical experience program approved by the Board specific to each category for which the applicant seeks a Permanent Initial LXMO permit.¶

(E) A temporary initial limited permit holder may me, a person must retake the Core Module and didactic portions of the Radiographic Procedure Module as described in this rule and obtain a new course completion certificate.¶

(3) A Permanent LXMO Permit holder may add an anatomical area to their existing Permit by obtaining a course completion certificate from a course of study that is approved by the Board as described in this rule and apply to renew OBMI for a temporary limited LXMO permit in an anatomic area in order to have additional time to complete the practical experience requirements. The following steps must be taken to apply for a temporary limited permit renewal:¶

(i) The applicant must provide documentation of having taken the ARRT Limited Scope Examination in Diagnostic Radiologic Technology in the anatomic area in which more time is needed to complete practical experience; and¶

(ii) The applicant must deliver the renewal application to the Board no later than the expiration date indicated on the initial temporary permit; and¶

(iii) The applicant must in that anatomic area. The applicant can only work on live patients in the desired anatomic area if the applicant has a Temporary LXMO Permit in the desired anatomic area. The applicant has one year from the date on the course completion certificate to complete all practical experience requirements and apply for a Permanent Permit within the twelve-month time-frame starting from the date of the Initial Temporary Permit and ending with the date the applicant's Permanent Initial Permit is received at the Board office¶

(g) As specified in this rule for that specific anatomic area, pass the ARRT examination for that anatomic area, and notify OBMI to add the anatomic area to their existing Permanent Initial LXMO Permit must be obtained within the 24-month time frame as outlined in this section. A temporary permit holder must submit an application for a Permanent Initial LXMO Permit to the Oregon Board of Medical Imaging within seven days of completing all requirements to obtain a Permanent Initial Limited Permit as outlined in this section. This seven-day deadline begins when the following two steps are completed in any order: ¶

(A) The graduate obtains a signed practical experience certification form in an anatomic area, and¶

(B) The graduate receives notification from the Board of successfully passing the ARRT exam in the same anatomic area¶

(3) The Board, at its discretion and upon a showing of good cause, upon written request, may extend specific deadlines established in this section to a later specified date, based upon a demonstration of compelling circumstances by the individual making the request for an extension. The Board may grant an extension that is based upon factors including but not limited to pregnancy, military service, or disability. This provision only applies to time limitations established by the board, and cannot be applicable to time limitations governed by entities other than the Board or that are otherwise governed by statute.¶

(4) ARRT Limited Scope Examination in Diagnostic Radiologic Technology Fees and application process:¶

(a) The examination fee consists of:¶

(A) \$20 for each examination category for which the student is tested; and¶

(B) An administration fee set by the American Registry of Radiologic Technologists (ARRT). ¶

(b) All listed fees, along with the necessary certifications and verifications that the applicant has completed Board-approved Core Module course and Radiographic Procedure Module courses, must be submitted to the Board.

Upon submission and acceptance of the application materials, OBMI shall register the graduate applicant with the ARRT for the ARRT exam.¶

(c) Graduates are allowed three attempts to pass an individual section of the ARRT exam.¶

(d) The Board, upon advance request, may approve a student to submit an application for the examination prior to the timeline specified in subsection (2), based upon school verification that the student is expected to complete all coursework. Verification must include a preliminary course completion certificate, endorsed by a responsible school official, indicating the courses for which the student is enrolled, expected completion date, and the student's status in each course. The final approved course completion certificate is required as part of the application for a temporary limited permit. A temporary limited permit will only be issued for anatomical areas for which the applicant has successfully completed coursework and obtained a passing score on the ARRT Core examination.¶

(e) The examination shall consist of sections:¶

(A) Core Section (Radiation Use and Safety, Equipment Operation, Quality Control, Image Production, Image Evaluation, and Patient Care); and¶

(B) Specific Radiographic Procedures (positioning and techniques) in the category or categories (Skull/Sinus, Spine, Chest, Extremities, and Podiatric).¶

(C) A score of 70 percent constitutes a minimum passing score for each section of the limited scope examination;¶

(D) Limited scope examinations will be administered at computer-based testing sites identified by ARRT. The graduate is subject to rules regarding test administration at the testing site.¶

(E) The application fee for the LXMO permit examination is non-refundable.¶

(5) A permanent LXMO permit will only be issued to graduates who have passed the ARRT CORE exam, and will only be issued in anatomic areas for which the graduate has passed the respective ARRT exam and completed clinical experience requirements. A permanent limited permit can only be issued to applicants who have passed CORE and at least one anatomic area.¶

(6) To add an anatomic area to an existing permit: Once a permanent LXMO permit holder completes an approved educational program to add an anatomic area to their permit, the applicant may apply to OBMI for a temporary permit to complete practical experience requirements in that anatomic area. The applicant can only work on live patients in the added anatomic area if the applicant has a temporary permit in the added anatomic area. The applicant has one year from the date on the course completion certificate to complete practical experience requirements as specified in rule for that specific anatomic area, pass the ARRT examination for that anatomic area, and notify OBMI to add the anatomic area to their permanent permit. The applicant is eligible for one six-month temporary permit, which may be renewed one time and can extend no longer than 12 months from the date on the course completion certificate. To qualify for a temporary permit renewal, the applicant must show that they have taken the ARRT exam in the relevant anatomic area. A permanent limited permit holder does not need to pass the CORE exam to add an anatomic area.¶

(7) Bone densitometry permit application process:¶

(a) An applicant for a limited permit in x-ray bone densitometry must complete all of the following and adhere to all time frames indicated:¶

(A) Must be at least 18 years of age; and¶

(B) Have successfully passed a Board approved 24-hour course of instruction which includes not less than 20 hours of radiation protection, equipment operation and quality control specific to x-ray bone densitometry, and meets the didactic and practical experience requirements stated in the Board's publication "Behavioral Objectives and Teaching Guide Bone Densitometry Equipment Operators" dated October 2019 which is incorporated by reference and made a part of this rule; and¶

(C) Obtain a signed course completion certificate from the Board approved course¶

(i) Graduate status begins with the date indicated on the course completion certificate. A graduate has no longer than 12 months to complete all requirements.¶

(ii) Graduate status ends after 12 months or seven days after the date on which an applicant becomes eligible for a permanent bone densitometry permit¶

(iii) A Graduate has 12 months to complete all of the requirements starting from the date on the course completion certificate and ending on the date the applicant's Permanent Initial LXMO Permit application is received by the Board.¶

(D) Apply for, take and pass the ARRT Bone Densitometry Equipment Operators Examination.¶

(i) The passing score is 70 percent¶

(ii) A graduate is allowed three attempts to pass the exam provided the one-year time frame is adhered to; and¶

(E) Apply for and obtain a bone densitometry Permanent Initial limited permit from OBMI including paying the fee set by the Board.¶

(b) Every person who performs bone densitometry procedures must have passed the ARRT Bone Densitometry Equipment Operators Examination and be in possession of an active bone densitometry limited permit from

OBMI, except for a person who has a radiography license from OBMI or who is exempted from OBMI's licensure requirements. ¶

(8) The Board, at its discretion and upon a showing of good cause, upon written request, may extend specific deadlines established in this section to a later specified date, based upon a demonstration of compelling circumstances by the individual making the request for an extension. The Board may grant an extension that is based upon factors including but not limited to pregnancy, military service, or disability. This provision only applies to time limitations established by the Board. The applicant is eligible for one six-month Temporary LXMO Permit, which may be renewed one time and can extend no longer than 12 months from the date on the course completion certificate. A permanent limited permit holder does not need to pass the CORE module exam to attempt to add an anatomic area. ¶

(4) The Board, at its discretion and upon a showing of good cause, upon written request, may extend specific deadlines established in this rule to a later specified date, based upon a demonstration of compelling circumstances by the individual making the request for an extension. The Board may grant an extension that is based upon factors including but not limited to pregnancy, military service, or disability. This provision only applies to time limitations established by the board, and cannot be applicable to time limitations governed by entities other than the Board or that are otherwise governed by statute. ¶

(5) ARRT Limited Scope Examination in Diagnostic Radiologic Technology Fees and application process: ¶

(a) The ARRT examination fees and procedures to apply are set by ARRT; and ¶

(b) A \$20 additional fee is required for each examination module for which the applicant is tested; and ¶

(c) All fees, along with the required certifications and verifications that the applicant has completed Board-approved Core Module course and Radiographic Procedure Module courses, must be submitted to the Board. Upon submission and acceptance of the application materials, OBMI shall begin the ARRT exam registration for the applicant; and ¶

(d) The examination shall consist of sections as described in the "Limited X-Ray Machine Operator (LXMO) Instruction Manual" dated October 2023; and ¶

(e) Limited scope examinations will be administered at computer-based testing sites identified by ARRT. The applicant is subject to rules regarding test administration at the testing site; and ¶

(f) All application fees are non-refundable. ¶

(6) Application for a permanent Bone Densitometry Limited Permit. ¶

(a) Applicants are required to complete multiple steps to obtain a Bone Densitometry Limited Permit. An applicant for a Bone Densitometry Limited Permit must provide evidence of and complete all of the following within a 12-month period starting with the date on the course completion certificate from a course of study that is approved by the Board and ending with the date of the Bone Densitometry Limited Permit application: ¶

(b) Must be at least 18 years of age; and ¶

(c) Pay a non-refundable application fee; and ¶

(d) Successfully attend and pass a course of study that is approved by the Board and obtain a signed course completion certificate that meets the didactic and practical experience requirements stated in the Board's publication "Bone Densitometry Instruction Manual" dated October 2023 which is incorporated by reference and made a part of this rule and is found on the OBMI website: <https://www.oregon.gov/obmi/Documents/Bone-Densitometry-Instructor-manual-current.pdf>; and ¶

(e)(A) Provided an applicant has a valid course completion certificate as described in this rule, apply through OBMI, take, and pass with a score of at least 70 percent, the ARRT Bone Densitometry Equipment Operators Examination ¶

(B) A person is allowed three attempts to pass the ARRT Bone Densitometry Equipment Operators Examination during the 12-month time frame. Upon failure of the three attempts, all course work must be repeated, and a new course completion certificate is required; and ¶

(f) Provided an applicant has passed the ARRT Bone Densitometry Equipment Operators Examination, apply for a Permanent Bone Densitometry Limited Permit. ¶

(g) In the event that a person is unable to complete all requirements to obtain a Bone Densitometry Limited Permit in the 12 months' time frame, a person must repeat all course work and obtain a new course completion certificate. ¶

(h) Every person who performs bone densitometry procedures must have an active bone densitometry limited permit from OBMI, except for a person who has a radiography license from OBMI or who is exempted from OBMI's licensure requirements. ¶

(7) The Board, at its discretion and upon a showing of good cause, upon written request, may extend specific deadlines established in this rule to a later specified date, based upon a demonstration of compelling circumstances by the individual making the request for an extension. The Board may grant an extension that is based upon factors including but not limited to pregnancy, military service, or disability. This provision only applies to time limitations established by the Board and cannot be applicable to time limitations governed by entities

other than the board or that are otherwise governed by statute. The extension may be provided through authorization for an additional temporary permit for a period of time specified by the Board.

Statutory/Other Authority: ORS 688.555

Statutes/Other Implemented: ORS 688.515

RULE SUMMARY: Revise for clarity

CHANGES TO RULE:

337-010-0033

Fluoroscopy Permits for Physician Assistants ¶¶

(1) Physician Assistant (PA), as defined in ORS 677.505 to 677.525, may apply for a Limited Permit to practice Fluoroscopy provided all of the following are completed in the order listed and time frames indicated in this section. A Physician Assistant must:¶¶

(a) Successfully complete and obtain certification of a passing score on the post-test of the didactic component of the Board-approved version of the Fluoroscopy Educational Framework (Fluoroscopy Framework) dated December 2009 for the Physician Assistant; a program that was developed through collaboration of the American Academy of Physician Assistants (AAPA) and the American Society of Radiologic Technologists (ASRT); and¶¶

(b) Complete and submit to the OBMI a Board-approved device orientation checklist for each manufacturer and model intended to be used in the course of practicing fluoroscopy; and¶¶

(c) Document and submit to the OBMI all required clinical experience as outlined in the Fluoroscopy Framework and by adhering to all of the following;¶¶

(A) A Temporary Permit is not required to complete Clinical requirements; however, the PA must have the supervisor-evaluator in the room to personally supervise and evaluate all clinical training.¶¶

(B) Supervision and evaluation must be provided by either the physician assistant's supervising physician, or by a licensed radiologist, licensed radiographer or medical physicist. Supervision while obtaining clinical experience must be personally provided, in the room, during all clinical procedures.¶¶

(d) Copy of current physician assistant license in good standing from the Oregon Medical Board; the license must indicate active, locum tenens, or military/public health active registration.¶¶

(e) Apply for, take and pass the American Registry of Radiologic Technologists (ARRT) Fluoroscopy Examination.¶¶

(A) Applicants desiring to sit for the Fluoroscopy Exam are designated as "applicants" and must properly submit to the Board applications for examinations and fees in accordance with this rule. Applicants are the only persons authorized to submit ARRT examination applications to the Board and to sit for the ARRT Fluoroscopy exam.

Applicant status expires upon whichever of the following occurs first:¶¶

(i) One year from the date of successful completion of the didactic component of the fluoroscopy framework, as reflected on the certificate indicating a passing score on the post-test, or¶¶

(ii) Immediately upon failure of the third attempt to pass the ARRT fluoroscopy examination within the one-year time-frame, or¶¶

(iii) Immediately upon passing the ARRT fluoroscopy examination.¶¶

(B) The examination application must be accompanied by a non-refundable processing fee of \$20 plus the examination fee set by the ARRT for each examination application submitted.¶¶

(C) Upon submission of the complete application, which includes completed requirements as specified in this section, the OBMI will register the applicant for the ARRT Fluoroscopy Examination with the ARRT.¶¶

(D) A passing score is 75%. The applicant may attempt to pass the examination up to three times. An applicant who fails to pass the ARRT Fluoroscopy Examination after the third attempt is required to retake and complete all of the didactic and clinical components before applying to sit for the examination again. A new exam application and associated non-refundable fees must be submitted to the OBMI for each time an applicant wishes to sit for the exam.¶¶

(E) The examination will be administered at computer-based testing sites identified by the ARRT. The applicant is subject to the rules regarding test administration at the testing site.¶¶

(F) The application fee for the examination is non-refundable.¶¶

(2) To obtain a 2-year Permanent Initial Limited Permit in fluoroscopy, a PA must submit to the Board and adhere to all of the following:¶¶

(a) Possess a current unexpired physician assistant license in good standing from the Oregon medical board indicating active, locum tenens, or military/public health active registration; and¶¶

(b) Provide documentation of successful completion of the didactic and clinical components of the fluoroscopy educational framework developed jointly by the ASRT and the AAPA; and¶¶

(c) Pass the ARRT fluoroscopy examination; and¶¶

(d) Complete and submit a Permanent Initial Limited Permit in fluoroscopy application to the Board of Medical Imaging, in the form and manner specified by the Board; and¶¶

(e) Pay the non-refundable permit fee established by the Board of Medical Imaging; and¶¶

(f) Submit to a criminal background check as specified by the Board of Medical Imaging.¶¶

(3) Permanent Limited Permit Fluoroscopy Renewal. Permit holders must renew a Limited Permit and pay all renewal application fees every 2 years in accordance with established Oregon Board of Medical Imaging Birth month renewal OAR 337-020-0015 and including all of the following:¶¶

(a) Possess a current unexpired physician assistant license in good standing from the Oregon Medical Board indicating active, locum tenens, or military/public health active registration; and¶¶

(b) Complete and submit a permit application to the Board of Medical Imaging, in the form and manner specified by the Board of Medical Imaging; and¶¶

(c) Pay the nonrefundable permit fee established by the Board of Medical Imaging; and¶¶

(d) Complete required Continuing Education(CE) as follows: 4 hours of CE per year or 8 hours for a 2-year renewal. Two of the yearly required 4 hours must be related to radiation use and safety, and two hours must be related to the clinical use of fluoroscopy;¶¶

(e) For a fluoroscopy permit applicant whose permit has been expired for 24 continuous months, the applicant must follow all the steps as outlined in subsection (3) ~~in~~of this ~~section~~rule and provide documentation of having passed the ARRT Fluoroscopy Examination within the previous 12 months.

Statutory/Other Authority: ORS 688.555

Statutes/Other Implemented: 2015 HB 2880, ORS 688.510

AMEND: 337-010-0037

RULE SUMMARY: revise for clarity and consistency

CHANGES TO RULE:

337-010-0037

Fluoroscopy Supervision Permits for Advanced Practice Registered Nurses

(1) An Advanced Practice Registered Nurse (APRN), as defined in ORS 678.025, may apply for a Limited Permit to Supervise Fluoroscopy provided all of the following are completed in the order listed and time frames indicated in this section. An APRN must:

(a) Successfully complete and obtain certification of a passing score on the post-test of the didactic component of the board-approved version of the Fluoroscopy Educational Framework (Fluoroscopy Framework) dated December 2009 for the Physician Assistant; a program that was developed through collaboration of the American Academy of Physician Assistants and the American Society of Radiologic Technologists. The Board shall waive some or all didactic requirements based upon submission by the applicant of documentation confirming that the applicant has completed the equivalent of the didactic requirements outlined in the Fluoroscopy Framework; and

(b) Complete and submit to the OBMI a Board-approved APRN device orientation checklist for each manufacturer and model intended to be used in the course of fluoroscopy supervision; and

(c) Document and submit to the OBMI all required clinical experience as outlined in the Fluoroscopy Framework and by adhering to all of the following:

(A) A Temporary Permit is not required to complete Clinical requirements; however, the advanced practice registered nurse must have the supervisor-evaluator in the room to personally supervise and evaluate all clinical training.

(B) Personal Supervision and evaluation must be provided by either a physician licensed under ORS Chapter 677 or an advanced practice registered nurse with an active license from the Oregon State Board of Nursing and who holds an active fluoroscopy permit issued in accordance with this rule.

(C) The Board shall waive some or all of the clinical experience requirements specified in this section based upon submission by the applicant documentation confirming that the applicant has already completed the equivalent of the clinical experience requirements; and

(d) Submit verification of active advanced practice licensure with the Oregon State Board of Nursing; and

(e) Apply for, take and pass the American Registry of Radiologic Technologists (ARRT) Fluoroscopy Examination.

(A) Applicants desiring to sit for the Fluoroscopy Exam are designated as "applicants" and must be Advanced Practice Registered Nurses who properly submit to the Board applications for examinations and fees in accordance with this rule. Applicants are the only persons authorized to submit ARRT examination applications to the Board and to sit for the ARRT Fluoroscopy exam. Applicant status expires upon whichever of the following occurs first:

(i) One year from the date of successful completion of the didactic component of the fluoroscopy framework or Board approved waiver, as reflected on the certificate indicating a passing score on the post-test or on the date the Board approves the waiver, or

(ii) Immediately upon failure of the third attempt to pass the ARRT fluoroscopy examination within the one-year time-frame, or

(iii) Immediately upon passing the ARRT fluoroscopy examination.

(B) The examination application must be accompanied by a non-refundable processing fee of \$20 plus the examination fee set by the ARRT for each examination application submitted.

(C) Upon submission of the complete application, which includes completed requirements as specified in this section or a Board waiver in accordance with this rule, the OBMI will register the applicant for the ARRT Fluoroscopy Examination with the ARRT.

(D) A passing score is 75%. The applicant may attempt to pass the examination up to three times. An applicant who fails to pass the ARRT Fluoroscopy Examination after the third attempt is required to retake and complete all of the didactic and clinical components before applying to sit for the examination again. A new exam application and associated non-refundable fees must be submitted to the OBMI for each time an applicant wishes to sit for the exam.

(E) The examination will be administered at computer-based testing sites identified by the ARRT. The applicant is subject to the rules regarding test administration at the testing site.

(F) The application fee for the examination is non-refundable.

(G) The Limited Permit to Supervise Fluoroscopy is not an authorization to operate fluoroscopy equipment.

(2) To obtain a 2-year Permanent Initial Limited Permit to supervise fluoroscopy, an APRN must submit to the Board and adhere to all of the following:

- (a) Possess a current unexpired license in advanced practice registered nursing from the Oregon State Board of Nursing; and¶¶
 - (b) Comply with the Board's requirements to sit for the ARRT fluoroscopy examination and have passed the ARRT fluoroscopy examination; and¶¶
 - (c) Complete and submit a Permanent Initial Limited Permit to supervise fluoroscopy application to the Board of Medical Imaging, in the form and manner specified by the Board; and¶¶
 - (d) Pay the non-refundable permit fee established by the Board of Medical Imaging; and¶¶
 - (e) Submit to a criminal background check as specified by the Board of Medical Imaging.¶¶
- (3) Permanent Limited Permit to Supervise Fluoroscopy Renewal. Permit holders must renew a Limited Permit and pay all renewal application fees every 2 years in accordance with established Oregon Board of Medical Imaging Birth month renewal OAR 337-020-0015 and including all of the following:¶¶
- (a) Possess a current unexpired license in advanced practice registered nursing from the Oregon State Board of Nursing; and¶¶
 - (b) Complete and submit a permit application to the Board of Medical Imaging, in the form and manner specified by the Board of Medical Imaging; and¶¶
 - (c) Pay the nonrefundable permit fee established by the Board of Medical Imaging; and¶¶
 - (d) Complete required Continuing Education(CE) as follows: 4 hours of CE per year or 8 hours for a 2-year renewal. Two of the yearly required 4 hours must be related to radiation use and safety, and two hours must be related to the clinical use of fluoroscopy; and¶¶
 - (e) Submit to a criminal background check as specified by the Board of Medical Imaging.¶¶
- (4) For a Permanent Limited Permit to Supervise Fluoroscopy applicant whose permit has been expired for 24 continuous months, the applicant must follow all the steps as outlined in section (3) of this rule and provide documentation of having passed the ARRT Fluoroscopy Examination within the previous 12 months.
- Statutory/Other Authority: ORS 688.555
Statutes/Other Implemented: SB 128 (2019), ORS 688.620, ORS 688.505

RULE SUMMARY: Revise for clarity

CHANGES TO RULE:

337-010-0045

Temporary Licensee ¶

(1) Temporary License ¶

(a) A temporary license is intended to allow students or graduates of an approved school to gain additional paid medical imaging experience in the applicable imaging modality before completing required credentialing examinations. ¶

(b) ~~Student~~ Applicants may apply for a temporary license under the following conditions: ¶

(A) ~~Student~~ Graduates that have successfully completed an approved school's didactic and clinical programs; or ¶

~~(B) Students that will successfully complete an approved school's didactic and clinical programs within 6 months and will be effective upon completion of the approved school's program; or within 2 years of application; ¶~~

~~(C) Students with an endorsement to OBMI from the medical imaging program director at a student's school, indicating that the student is in good standing and is in the process of meeting educational requirements for graduation on a specified date, and that the student is competent to work under direct supervision. In this case, a temporary license may be issued which will be valid for up to ~~five~~six months prior to the specified course completion date. ¶~~

(c) A temporary license is valid for 6 months and may be renewed for a single six-month period ~~upon Board approval.~~ ¶

(d) A temporary licensee ~~must apply to the Board for a Permanent medical imaging license within 30 days of being is invalid~~ 30 days after a person is awarded a valid credential in a medical imaging modality by a recognized credentialing organization. ¶

(e) If a temporary licensee is also licensed by the Board in another medical imaging modality, the restrictions of this ~~subsection~~ rule shall only apply when the individual is functioning as a temporary licensee. ¶

(2) Temporary Licensee Supervision. A temporary licensee may only operate the applicable medical imaging modality under the ~~indirect~~ supervision of a licensed physician, or an individual licensed by the Board and credentialed by a credentialing organization in the medical imaging modality identified on the temporary license. For purposes of this ~~subsection, in rule,~~ direct supervision means that the supervisor is physically present in the building and available to assist the temporary licensee as needed. ¶

(3) Temporary License to add an imaging modality to a current license. ¶

(a) ~~The temporary post-primary license (TPPL) is intended for current licensees desiring to complete clinical requirements necessary to become credentialed in an additional and different modality. In order for a licensee to acquire the clinical experience, a temporary post-primary license in the desired modality must be acquired from the OBMI. Supervision must be provided by a physician or technologist fully licensed to practice in the same modality as the modality listed on the temporary post-primary license. All practice completed under the TPPL must be specific to the modality on the TPPL and must be applicable to the temporary post-primary licensee's clinical requirements for the licensure modality desiring to be added. ¶~~

(b) ~~A temporary post-primary license is valid for six months and may be renewed for a single six-month period upon Board approval. In addition, the temporary license issued under this subsection may be permitted to have extended license renewals for up to two additional six-month periods based upon a showing of good cause for each six-month extension renewal, demonstrating that the credentialing registry's clinical requirements cannot be completed within the prescribed timeframe due to limitations of the clinical practice site. ¶~~

(c) ~~Levels of supervision for temporary post-primary license: For purposes of this subdivision, temporary post-primary licensees must receive direct supervision for at least the initial six months of the temporary license duration, with indirect supervision for the remaining period of temporary licensure. For purposes of this subsection, direct supervision means that the supervisor is physically present with the temporary licensee and patient. Indirect supervision has the same meaning as Paragraph (2). ¶~~

(d) ~~Application process: The following conditions must be met in order to obtain a temporary post-primary license: ¶~~

~~(A) The applicant must provide documentation that the applicant has completed a minimum of 16 hours of category "A" content-related education. The Board may require confirmation of clinical supervision and clinical practice site, and may limit the temporary post-primary licensee to one or more specific practice sites; ¶~~

~~(B) The Board may require confirmation that the applicant is eligible for credentialing in the new modality, if the relevant clinical experience requirements are met, and may deny an application based upon a lack of evidence of eligibility; ¶~~

(4) Temporary Computed Tomography (CT) License: Technologists with active OBMI licensure in radiography, radiation therapy or nuclear medicine who are in the process of obtaining CT experience in order to sit for a CT credentialing examination shall first obtain a temporary license from the Board while they perform the required CT competencies under this section. Competencies shall be performed under supervision of a licensed physician or credentialed CT technologist who physically present in the building and available to assist the temporary licensee as needed. The Board may require documentation or confirmation of supervision and that a technologist who has a temporary license under this paragraph or who is applying for a temporary license under this paragraph is in the process of obtaining a CT credential under this paragraph, and may deny an application for a temporary license based upon the Board's determination that an applicant is not working toward a CT credential, does not have a realistic possibility of earning the CT credential, or that the applicant does not have the required supervision. As a condition of holding a temporary CT license, the board may require temporary CT license holders to file periodic reports with the board, including information the board seeks to determine progress toward completing clinical requirements. ¶

(a) Education prerequisite: As part of the application for a temporary CT license, the applicant must provide documentation of a minimum of eight (8) hours of Category "A" didactic education in CT and eight (8) hours of Category "A" didactic training in cross sectional anatomy. These hours must have been earned within the 24-month period directly preceding submission of the application. ¶

(b) Duration of temporary CT license: A temporary CT license is valid for six months and may be renewed for a single six-month period upon Board approval. In addition, the temporary license issued under this subsection may be permitted to have extended renewals for up to two additional six-month periods based upon information the applicant provides to support the request for an extension. The Board may make a ruling on the extension for temporary licensure for CT based upon factors including, but not limited to a review and evaluation of information submitted by the applicant, which must include: ¶

(A) Documentation that the credentialing registry's clinical requirements cannot be completed within the prescribed timeframe due to limitations of the applicant's clinical practice site; and ¶

(B) The applicant's written plan regarding how the applicant expects to meet the prerequisites to sit for the registry exam, including information to confirm how many prerequisites have already been completed and will be eligible for inclusion as registry prerequisites. ¶

(5) The Board, at its discretion and upon a showing of good cause, upon written request submitted to the Board, may extend specific deadlines established in this section to a later specified date, based upon a demonstration of compelling circumstances by the individual making the request for an extension. The Board may grant an extension that is based upon factors including but not limited to pregnancy, military service, or disability. This provision only applies to time limitations established by the Board, and cannot be applicable to time limitations governed by entities other than the board or that are otherwise governed by statute. The extension may be provided through authorization for an additional temporary license for a period of time specified by the Board. The Board, at its discretion and upon a showing of good cause, upon written request submitted to the Board, may extend specific deadlines established in this rule to a later specified date, based upon a demonstration of compelling circumstances by the individual making the request for an extension.

Statutory/Other Authority: ORS 688.555

Statutes/Other Implemented: ORS 688.520(7)

RULE SUMMARY: Provide a separate rule for Temporary post-primary licensure

CHANGES TO RULE:

337-010-0046

Temporary Post-Primary License

(1) Temporary Post-Primary License ¶

(a) The temporary post-primary license (TPPL) is intended for a licensee who desires to complete clinical requirements necessary to become credentialed in an additional and different modality. A licensee must hold an OBMI temporary post-primary license in the desired modality to practice imaging and complete the required clinical experience. ¶

(A) Supervision must be provided by a technologist fully licensed to practice in the same modality as the modality listed on the temporary post-primary license. ¶

(B) All practice completed under the TPPL must be specific to the modality on the TPPL and must be applicable to the temporary post-primary licensee's clinical requirements for the licensure modality desiring to be added. ¶

(C) Levels of supervision for temporary post-primary license: For purposes of this rule, temporary post-primary licensees must receive personal supervision for at least the first three months of the initial temporary post-primary license, with direct supervision for the remaining period of any temporary post-primary licensure. For purposes of this rule, personal supervision means that the supervisor is physically present with the temporary licensee and patient. Direct supervision means that the supervisor is physically present in the building and available to assist the temporary licensee as needed. ¶

(b) A temporary post-primary license is valid for six months and may be renewed for a single six-month period. In addition, the temporary post-primary license issued under this rule may be permitted, upon Board approval, to have extended license renewals for up to two additional six-month periods based upon a showing of good cause for each six-month extension renewal, demonstrating that the credentialing registry's clinical requirements cannot be completed within the prescribed timeframe due to limitations of the clinical practice site. The applicant's written plan regarding how the applicant expects to meet the prerequisites to sit for the registry exam, including information to confirm how many prerequisites have already been completed and will be eligible for inclusion as registry prerequisites. ¶

(c) Application process: The following conditions must be met to obtain a temporary post-primary license: ¶

(A) The applicant must provide documentation that the applicant has completed a minimum of 16 hours of category "A" content-related education. The applicant must provide documentation of a minimum of eight (8) hours of Category "A" didactic education in the modality related to the desired temporary post-primary license and eight (8) hours of Category "A" didactic training in cross-sectional anatomy. These hours must have been earned within the 24-month period directly preceding submission of the application. ¶

(B) The Board may require confirmation of clinical supervision and clinical practice site, and may limit the temporary post-primary licensee to one or more specific practice sites: ¶

(C) The Board may require confirmation that the applicant is eligible for credentialing in the new modality, if the relevant clinical experience requirements are met, and may deny an application based upon a lack of evidence of eligibility. ¶

(2) The Board, at its discretion and upon a showing of good cause, upon written request submitted to the Board, may extend specific deadlines established in this rule to a later specified date, based upon a demonstration of compelling circumstances by the individual making the request for an extension.

Statutory/Other Authority: ORS 688.555

Statutes/Other Implemented: ORS 688.520

AMEND: 337-020-0015

RULE SUMMARY: Updates rule for current practices and clarity

CHANGES TO RULE:

337-020-0015

Timely Renewal of Medical Imaging Permanent Licenses and Permits ¶¶

~~(1) Before the expiration date of a license or permit, the Board may mail or email notice for renewal of license or permit to the current contact information on file with the Board to every person holding a current license or permit.¶¶~~

~~(2) An applicant for renewal of a license or permit must accurately complete the online renewal form and, pay the applicable non-refundable fees and submit any additional information requested by the Board.¶¶~~

~~(32) A license or permit expires at midnight biennially on the first day of the birth month of the licensee or permit holder.¶¶~~

~~(43) An OBMI license or permit renewal application must be postmarked or electronically received at the OBMI office on or before the first day of the renewal month to be considered a timely submission.¶¶~~

~~(54) No person is allowed to practice medical imaging after a license or permit expires.¶¶~~

~~(65) No applicant for initial or renewal licensure may practice medical imaging until the applicant has received a certificate of online approval of licensure, either a license or a permit, from the Board, or until the applicant can verify the approved valid license or permit electronically on the OBMI website.¶¶~~

~~(76) No person who has allowed a license or permit to expire may practice medical imaging until such person has renewed or reinstated a license or permit and has received a certificate of online approval of licensure from the Board, or until the applicant can verify the approved valid license or permit electronically on the OBMI website.¶¶~~

~~[ED. NOTE: Forms referenced are available from the agency.]~~

Statutory/Other Authority: ORS 688.555(1)

Statutes/Other Implemented: ORS 688.445(5), 688.515(4)

AMEND: 337-021-0073

RULE SUMMARY: Updates for clarity

CHANGES TO RULE:

337-021-0073

Renewal Surcharge for Workforce Data Questionnaire ¶

With each renewal, the Board may assess the surcharge established by the Oregon Health Authority pursuant to ORS 676.410, for the workforce data questionnaire. License and permit renewal applicants must complete the workforce data questionnaire prior to submitting all permanent renewal applications.

Statutory/Other Authority: ORS 688.555(1)

Statutes/Other Implemented: ORS 688.425, 676.410(7)

ADOPT: 337-030-0001

RULE SUMMARY: Provides a rule for compliance with requirements to practice medical imaging

CHANGES TO RULE:

337-030-0001

Unlicensed Practice

A person cannot practice a medical imaging modality on a patient in Oregon unless the person is licensed in accordance with the provisions of ORS 688.405 to 688.605.

Statutory/Other Authority: ORS 688.555

Statutes/Other Implemented: ORS 688.555

AMEND: 337-030-0002

RULE SUMMARY: Amends rule for clarity

CHANGES TO RULE:

337-030-0002

Unprofessional Conduct ¶

Unprofessional Conduct includes but is not limited to the following:¶

- (1) Engaging in the practice of medical imaging ~~technology~~ while under the influence of intoxicating liquor, controlled substance, or any other drugs which impair consciousness, judgment, or behavior to the extent that normal physical or mental faculties are impaired. ~~For purposes of this definition, a person is "under the influence" of intoxicating liquor if either the person has 0.08 % or above of alcohol in the blood as shown by a chemical analysis of breath or blood or other evidence establishes that the person's normal physical or mental faculties are impaired after having consumed intoxicating liquor; or¶~~
- (2) Making or filing false reports or records impeding or obstructing the proper making and filing of reports or records, or failing to file the proper report or record in the practice of medical imaging technology or during the licensure process; or¶
- (3) Accessing, disclosing, misusing, or altering information in violation of state ~~and~~ federal law; or¶
- (4) Discrimination in the practice of medical imaging against any person on account of sex, race, religion, creed, color, gender identity or national origin; or¶
- (5) Repeatedly failing to abide by city, state, and federal regulations or laws pertaining to the practice of medical imaging; or¶
- (6) Engaging in sexual harassment ~~or misconduct~~ in the practice of medical imaging; ~~or otherwise. Sexual harassment or misconduct includes but is not limited to: comments or gestures of a sexual nature or touching of a person when the recipient states expressly or it can be reasonably inferred, that the comment, gesture or touching is unwanted by the recipient; Physical or verbal behavior that is sexually exploitative or demeaning; seductive comment¶~~
- (7) Engaging in misconduct in the practice of medical imaging; or¶
- (8) (a) Failing to provide competent care to a patient. Competent care requires the technical knowledge, skill, thoroughness, and preparation reasonably necessary for ~~gestu~~the cares; or¶
- (7b) Failing to provide competent care to ~~Performing a medical imaging modality on more than one patient at a patient. Competent care requires the technical knowledge, skill, thoroughness, and preparation reasonably necessary for~~time is not competent care; or¶
- (9) Violation of ORS 688.405 to 688.620 & 688.915 or any rule of the Board; or¶
- (10) Failure to timely pay any civil penalty imposed by the ~~e~~Board; or¶
- ~~(811)~~ Failure, assisting or permitting others to fail to protect client confidentiality or manage patient records in accordance with state or federal privacy laws; or¶
- ~~(912)~~ Failure to report pursuant to ORS 676.150(2), a known or probable violation of Oregon Statutes or Rules. Statutory/Other Authority: ORS 688.555(1)
Statutes/Other Implemented: ORS 688.525(1)(b)

AMEND: 337-030-0005

RULE SUMMARY: Amends rule for clarity and current process

CHANGES TO RULE:

337-030-0005

Enforcement, Investigations and Inspections ¶¶

~~(1) Investigations¶¶~~

~~(a) Licensees must report violations of ORS 688.405 through 688.605 and OAR 337.¶¶~~

~~(b) Disciplinary issues concerning administrative matters (e.g., lapsed license, false information, etc.)¶¶~~

~~(c) Disciplinary issues concerning scope of practice and standards of practice¶¶~~

~~(2) OBMI may form temporary peer review committees (TPRC's) in the relevant modality or subspecialty to advise the board of appropriate action.¶¶~~

~~(3) TPRC's will consider disciplinary issues concerning scope of practice and standards of practice.¶¶~~

~~(4) Selection and appointment of TPRC's by OBMI¶¶~~

~~(a) Composition¶¶~~

~~(A) Two licensees holding similar credentials¶¶~~

~~(B) One physician experienced in applicable medical specialty and imaging modality¶¶~~

~~(C) One public OBMI member¶¶~~

~~(b) Authority TPRC's will make recommendations to the OBMI¶¶~~

~~(c) Responsibilities¶¶~~

~~(A) Review relevant medical information resulting from investigation¶¶~~

~~(B) If necessary, request additional information be provided¶¶~~

~~(d) OBMI to make final determination¶¶~~

~~(e) Privacy, Confidentiality, Discoverability of information from investigation, Temporary Peer Review Committee, or OBMI meetings Committee members must maintain confidentiality as provided by ORS 676.175¶¶~~

~~(f) Licensee compliance with investigation – Inspections. In addition to those requirements set out in ORS 688.595, licenses and permits shall be on file in the department in which the licensee or permit holder works and shall be made available for inspection by the Radiation Protection Services (RPS), Department of Human Services, State of Oregon.~~

Statutory/Other Authority: ORS 688

Statutes/Other Implemented:

AMEND: 337-030-0010

RULE SUMMARY: Amends for clarity

CHANGES TO RULE:

337-030-0010

Imposition of Civil Penalties ¶

(1) When a civil penalty is imposed it does not preclude the imposition of any other disciplinary sanction against the licensee or permittee holder. ¶

(2) The civil penalty shall be payable to the Board by ~~cash~~ electronic payment methods, check, cashier's check, or money order. ¶

(3) Civil penalties shall be imposed per violation according to the following schedule in the absence of a ~~finding of~~ aggravating or mitigating circumstances: ¶

(a) Practicing medical imaging without a current and valid Oregon license or permit - \$500 per month; ¶

(b) Unprofessional conduct by a licensee or permittee holder - \$1,000; ¶

(c) Violation of ORS 688.405 to 688.6020 & 688.915 or any rule of the Board of Medical Imaging unless otherwise provided in this schedule, \$1,000; ¶

(d) Gross negligence in the practice of medical imaging, \$1,000; ¶

(e) Employing an individual to practice medical imaging when the individual does not have a current, valid Oregon license or permit: \$500 per day; ¶

(f) Making a false statement to the Board, \$500; ¶

(g) Practicing medical imaging outside the scope for which the license or permit is issued, \$500; ¶

(h) Obtaining or attempting to obtain a license or permit or a renewal of a license or permit by false representation, \$500; ¶

(i) Purporting to be a licensee or permit holder when the person does not hold a valid license or permit, \$1,000; ¶

(j) Practicing medical imaging under a false or assumed name, \$500; ¶

(k) Conviction of a crime where such crime bears a demonstrable relationship to the practice of medical imaging, \$1,000; ¶

(l) Has undertaken to act as a medical imaging licensee or as a LXMO without the required supervision under ORS chapter 688, \$1,000. ¶

~~(m) Employing or allowing an individual to practice medical imaging outside the scope of the license or permit, \$1,000; ¶~~

~~(n) Failure to notify the board within 30 days any changes to the contact information, \$100; ¶~~

~~(o) Providing incorrect or incomplete information, \$100; ¶~~

(4) The Board must report to the appropriate credentialing organizations all Board disciplinary actions ~~and all cases where the Board issues a conditional license.~~

Statutory/Other Authority: ORS 688.555(1)

Statutes/Other Implemented: ORS 688.415; ORS 688.915

AMEND: 337-030-0015

RULE SUMMARY: amend for clarity

CHANGES TO RULE:

337-030-0015

Aggravation and Mitigation ¶¶

~~After misconduct has been established,~~ aggravating and mitigating circumstances may be considered in the decision of any sanction that may be imposed.¶¶

(1) Aggravation or aggravating circumstances are any considerations or factors that may justify an increase in the degree of discipline to be imposed. Mitigation or mitigating circumstances are any considerations or factors that may justify a reduction in the degree of discipline to be imposed.¶¶

(2) Factors which may be considered as aggravating factors include:¶¶

(a) ~~Prior Board disciplinary offenses~~action;¶¶

(b) A pattern of misconduct;¶¶

(c) Multiple offenses;¶¶

(d) ~~Bad faith obstruction of the disciplinary proceeding by intentionally failing to comply with rules or orders of the disciplinary agency~~Board;¶¶

(e) Submission of false evidence, false statement, or other deceptive ~~practices~~conduct during the disciplinary process;¶¶

~~(f) Refusal to acknowledge wrongful nature of conduct or investigative process~~;¶¶

(3) Factors which may be considered mitigating factors include:¶¶

(a) Absence of a prior ~~disciplinary record~~Board action;¶¶

(b) Timely good faith effort to ~~make restitution or to rectify consequences of misconduct~~;¶¶

(c) ~~Full and free disclosure to disciplinary board or cooperative attitude toward proceeding~~; Cooperation with the Board's investigation; ¶¶

(d) Physical or mental disability or impairment;¶¶

(e) Interim rehabilitation;¶¶

(f) Imposition of other penalties or sanctions;¶¶

~~(g) For persons who practice medical imaging without ever having had a license from the board, in violation of OAR 337-010-0010(3)(b): if they have ever held a relevant license in another state or have ever held a relevant and recognized imaging registry credential.~~

Statutory/Other Authority: ORS 688.555

Statutes/Other Implemented: ORS 688.415(1), ORS 688.525

REPEAL: 337-030-0020

RULE SUMMARY: This rule is no longer applicable

CHANGES TO RULE:

~~337-030-0020~~

~~Requiring an Answer to Charges as Part of Notices to Parties in Contested Cases~~

~~In addition to the notice requirements under the Attorney General's Model Rules of Procedure adopted under OAR 337-001-0005, the notice to parties in contested cases may include the statement that an answer to the assertions or charges will be required, and if so, the consequence of failure to answer. A statement of the consequences of failure to answer may be satisfied by enclosing a copy of OAR 337-010-0075 with the notice.~~

~~Statutory/Other Authority: ORS 688~~

~~Statutes/Other Implemented:~~

AMEND: 337-030-0025

RULE SUMMARY: amends for clarity

CHANGES TO RULE:

337-030-0025

Hearing Request and Answers: Consequences of Failure to Answer ¶

(1) A hearing request, and answer ~~when required, shall~~must be made in writing to the Board by the party or the party's attorney and an answer ~~shall~~must include the following:¶

(a) An admission or denial of each factual matter alleged in the notice;¶

(b) A short and plain statement of each relevant affirmative defense the party may have.¶

(2) ~~Except for good cause:¶~~

~~(a)~~ Factual matters alleged in the notice and not denied in the answer shall be presumed admitted;¶

~~(b)~~3 Failure to raise a particular defense in the answer will be considered a waiver of such defense;¶

~~(c)~~ ~~New matters or affirmative defenses alleged in the answer shall be presumed to be denied by the agency; and~~¶

~~(d)~~4 Evidence shall not be taken on any issue not raised in the notice and answer.

Statutory/Other Authority: ORS 688

Statutes/Other Implemented: