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Rulemaking Hearing Rule(s) Filing Form

Rulemaking Hearing Rules are rules filed after and as a result of a rulemaking hearing (Tenn. Code Ann. § 4-5-205).

Pursuant to Tenn. Code Ann. § 4-5-229, any new fee or fee increase promulgated by state agency rule shall take effect on July 1, following the expiration of the ninety (90) day period as provided in § 4-5-207. This section shall not apply to rules that implement new fees or fee increases that are promulgated as emergency rules pursuant to § 4-5-208(a) and to subsequent rules that make permanent such emergency rules, as amended during the rulemaking process. In addition, this section shall not apply to state agencies that did not, during the preceding two (2) fiscal years, collect fees in an amount sufficient to pay the cost of operating the board, commission or entity in accordance with § 4-29-121(b).

Agency/Board/Commission:	Tennessee Board of Radiologic Imaging and Radiation Therapy
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Revision Type (check all that apply):

- ☐ Amendment
☒ New
☐ Repeal

Rule(s) (ALL chapters and rules contained in filing must be listed here. If needed, copy and paste additional tables to accommodate multiple chapters. Please make sure that **ALL** new rule and repealed rule numbers are listed in the chart below. Please enter only **ONE** Rule Number/Rule Title per row.)

Chapter Number	Chapter Title
0880-15	General Rules and Regulations Governing the Practice of Radiologic Imaging and Radiation Therapy
Rule Number	Rule Title
0880-15-.01	Definitions
0880-15-.02	Fees
0880-15-.03	Scope of Practice
0880-15-.04	License Requirement
0880-15-.05	Full License: Obtaining and Upgrading
0880-15-.06	Limited License: Obtaining and Upgrading
0880-15-.07	Limited License in Bone Densitometry: Obtaining and Upgrading
0880-15-.08	Educational Course, Approval and Curriculum for Limited License
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0880-15-.10	Maintaining License, Renewal, Retirement and Reinstatement
0880-15-.11	Continuing Education
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0880-15-.14	Officers, Records, Meeting Requests, Replacement Licenses, Consultants, Advisory

	Rulings, Declaratory Orders and Screening Panels
0880-15-.15	Advertising and Other Public Statements
0880-15-.16	Professional Ethics

Place substance of rules and other info here. Please be sure to include a detailed explanation of the changes being made to the listed rule(s). Statutory authority must be given for each rule change. For information on formatting rules go to <https://sos.tn.gov/products/division-publications/rulemaking-guidelines>.

New Rule Chapter 0880-15
General Rules and Regulations Governing the Practice of Radiologic Imaging and Radiation Therapy

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0880-15-.01 Definitions. As used in this Chapter of rules the following terms and acronyms will have the meaning ascribed to them:

- (1) A.R.R.T. – American Registry of Radiologic Technologists.
- (2) Board – The Tennessee Radiologic Imaging and Radiation Therapy Board of Examiners.
- (3) Board's Administrative Office – The office of the administrator assigned to the Board and housed within the Division.
- (4) Certification – a recognition issued by a National Certification Organization to individuals verifying their qualifications and credentials in accordance with established professional requirements or standards. A certification issued by a National Certification Organization is separate, distinct, and does not equate to a license issued by the Board.
- (5) Division – The Tennessee Department of Health, Division of Health Related Boards, from which the Board receives administrative support.
- (6) Full License – License issued by the Board to qualified individuals who maintain a current and unrestricted national certification issued by a National Certification Organization which will enable the Licensee to perform, except for bone densitometry, any and all radiologic imaging or radiation therapy procedures in the specialty area for which the individual is credentialed by the National Certification Organization.
- (7) Licensed Physician – a physician licensed under Tennessee Code Annotated Title 63, chapter 6 or an osteopathic physician licensed under Tennessee Code Annotated Title 63, chapter 9.
- (8) Licensee – Any Full Licensee or Limited Licensee who holds a current and lawfully-issued license by the Board.
- (9) Limited License – an x-ray machine operator license issued by the Board to qualified individuals for the

performance of static diagnostic radiography procedures or bone density procedures using equipment which emits external ionizing radiation resulting in diagnostic radiographic images in the specialty area for which the licensee is licensed. The specialty areas for limited licenses are chest, extremities, skull and sinus, or spine radiography or bone densitometry. Limited licensees may not perform fluoroscopy, computed tomography, magnetic resonance imaging, mammography, nuclear medicine, radiation therapy, mobile imaging procedures, or imaging procedures using oral and intravenous contrast media.

- (10) N.M.T.C.B. - Nuclear Medicine Technology Certification Board.
- (11) National Certification Organization - A.R.R.T., N.M.T.C.B., or other equivalent nationally recognized radiologic imaging or radiation therapy certification organization recognized by the Board.
- (12) Radiation Therapy – the use or application of ionizing radiation for the purpose of treating disease or illness on or in humans.
- (13) Radiography – the creation or acquisition of static or dynamic images of the structures of the human body using ionizing radiation from an external source by a Full Licensee.
- (14) Radiologic Imaging – the performance of any procedure or administration of any article intended for use in the diagnosis or visualization of disease or other medical conditions in human beings. These procedures include, but are not limited to, radiography, nuclear medicine, computed tomography, fluoroscopy, magnetic resonance, and other procedures using ionizing radiation or magnetic resonance; and does not include the use of ultrasound.
- (15) Specialty Area – the professional discipline or procedure a Licensee is licensed to practice. Specialty areas for Full Licenses include, but are not limited to, radiography, radiation therapy, nuclear medicine, computed tomography, magnetic resonance, and other procedures using ionizing radiation or magnetic resonance, as credentialed by a National Certification Organization and endorsed by the Board. Specialty areas for Limited Licenses are bone density and the selected specific parts of the human anatomy, including chest, extremities, skull and sinus, and spine. Specialty areas shall be indicated by an endorsement on the license.

Authority: T.C.A. §§ 63-6-901, 63-6-902 and Public Chapter 1029 of the Public Acts of 2016.

0880-15-.02 Fees. The following fees are nonrefundable and apply to all applicants and Licensees. If an applicant for initial licensure requests a waiver of initial licensure fees under T.C.A. § 63-1-161, the applicant shall submit a fee waiver form to the Board's Administrative Office. All fees may be paid in person, by mail, or electronically by cash, check, money order, or credit/debit cards accepted by the Division. Fees paid by certified, personal, or corporate check, must be drawn against an account in a United States bank and made payable to the Tennessee Radiologic Imaging and Radiation Therapy Board of Examiners

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|-----|---|----------|
| (1) | Application and License Fee - To be paid by all applicants at the time an application is filed | \$100.00 |
| (2) | Biennial License Renewal Fee - To be paid by all Licensees. | \$50.00 |
| (3) | State Regulatory Fee - To be paid upon application and to be collected at biennial renewal from all Licensees | \$10.00 |
| (4) | Late Renewal - Reactivation Fee | \$100.00 |
| (5) | License Upgrade Fee | \$25.00 |
| (6) | Duplicate License Fee | \$25.00 |

Authority: T.C.A. §§ 63-1-161, 63-6-901, 63-6-902 and Public Chapter 1029 of the Public Acts of 2016.

0880-15-.03 Scope of Practice.

- (1) Licensees must practice radiation therapy or radiologic imaging only in the specialty areas that are

indicated on the license as issued or upgraded and only for the types of imaging and procedures specified in these rules. Practicing radiologic imaging or radiation therapy beyond the scope of the license is grounds for revocation or other disciplinary action.

- (a) Licensees who are engaged in clinical training to upgrade their existing license with an additional specialty area may practice in the additional specialty area of training for a period of no more than two (2) years provided that the Licensee:
 - 1. Be supervised by a Licensed Physician in conjunction and consultation with a Licensee licensed in the applicable specialty area with at least one (1) year of experience.
 - 2. Notify the Board's Administrative Office in writing prior to engaging in clinical training. The two-year training period will begin upon receipt of written notification, and the written notification must be signed by the Licensee's training supervisor(s).
- (2) Licensees may use radioactive substances or equipment emitting ionizing radiation or magnetic resonance for radiologic imaging and radiation therapy procedures on or in humans for diagnostic or therapeutic purposes within their licensed specialty area only by prescription of an individual authorized by this state to prescribe radiologic imaging or radiation therapy procedures and under the supervision of a Licensed Physician.
- (3) Board-issued licenses shall be posted in a location visible to all patients receiving radiologic imaging or radiation therapy.
- (4) Full Licensees may perform any and all radiographic and radiation therapy procedures or functions that are within the accepted scope of practice for the applicable specialty area in which they are licensed.
- (5) Under no circumstances may a Limited Licensee perform fluoroscopy (including C-Arm units), computed tomography, magnetic resonance imaging, mammography, nuclear medicine, radiation therapy, mobile imaging procedures, or imaging procedures using oral and intravenous contrast media.

Authority: T.C.A. §§ 63-6-901, 63-6-902 and Public Chapter 1029 of the Public Acts of 2016.

0880-15-.04 License Requirement.

- (1) Individuals who have been issued full or limited x-ray certification by the Board of Medical Examiners or Board of Osteopathic Examination must have their certification converted to a license issued by the Tennessee Radiologic Imaging and Radiation Therapy Board of Examiners. The process for conversion is set forth in Rule 0880-15-.05(7) and Rule 0880-15-.06(6).
- (2) All persons performing radiologic imaging, radiography, or radiation therapy procedures in hospitals, outpatient diagnostic centers, recuperation centers, physicians' offices, or any other setting for human subjects must be licensed by the Board pursuant to this Chapter of rules with the exception of the following who are exempted from licensure:
 - (a) Licensed Physicians.
 - (b) Medical interns, residents and clinical fellows.
 - (c) Persons enrolled in a Board-recognized or independently accredited radiologic technology or radiation therapy educational program only as to radiologic imaging or radiation therapy procedures performed within or under the auspices of that program.
 - (d) Graduates of a Board-approved radiological education course who are awaiting examination, but only for a period not to exceed six (6) months from the date that the course was completed. This exemption shall continue for a period not to exceed seventy-five (75) days after the graduate sits for the examination. At all times while awaiting examination or examination results and until the license is received, graduates shall practice only under supervision as set forth in Rule 0880-15-.08(2)(c).

- (e) Operators of ionizing radiation equipment who are practicing within the scope of practice of a certification or license granted by another authorized board or committee of this state under this title.

Authority: T.C.A. §§ 63-6-901, 63-6-902 and Public Chapter 1029 of the Public Acts of 2016.

0880-15-.05 Full License: Obtaining and Upgrading.

- (1) Qualifications: To be eligible for a Full License a person must meet the following minimum qualifications:
 - (a) Be at least eighteen (18) years of age; and
 - (b) Be free from physical or mental impairment which would interfere with the performance of duties or otherwise constitute a hazard to the health and safety of patients; and
 - (c) Have submitted verification of a current and unrestricted National Certification Organization certificate; and
 - (d) Cause to be submitted to the Board's Administrative Office directly from the vendor identified in the Board's licensure application materials, the result of a criminal background check; and
 - (e) Have applied for licensure and paid all fees or qualify for a waiver of all initial licensure fees under T.C.A. § 63-1-161.
- (2) Examination: A current and unrestricted certification from a National Certification Organization will be a basis for full licensure.
- (3) Application for Full License:
 - (a) An applicant shall obtain an application form from the Board's Administrative Office, respond truthfully and completely to every question or request for information contained in the form, and submit it, along with all documentation and fees required by the form and this rule, to the Board's Administrative Office. It is the intent of this rule that all steps necessary to accomplish the filing of the required documentation be completed prior to filing an application and that all documentation be filed simultaneously.
 - (b) Along with the application, the applicant shall submit:
 - 1. Proof of current and unrestricted certification by a National Certification Organization, containing all applicable credentials; and
 - 2. The Application and License Fee as provided in Rule 0880-15-.02(1) and the State Regulatory Fee as provided in Rule 0880-15-.02(3), unless the applicant qualifies for a waiver of all initial licensure fees under T.C.A. § 63-1-161; and
 - 3. Proof of United States citizenship or evidence of being legally entitled to live or work in the United States; and
 - 4. A valid, current, government-issued photo ID.
- (4) Issuance of a license: Upon approval for issuance of a license, the Board shall issue a Full License, with endorsements for the applicable specialty area(s) as reflected by the application materials received.
- (5) Upgrade Full License: Licensees may upgrade an existing license with an additional specialty area endorsement by submitting an upgrade request form to the Board's Administrative Office and complying with the following:
 - (a) Submit proof of current and unrestricted certification by a National Certification Organization with a credential in the specialty area the Licensee wishes to perform radiologic imaging or radiation therapy procedures; and

- (b) Pay the License Upgrade Fee required in 0880-15-.02(5).
- (6) Bone Densitometry: Full Licensees may upgrade an existing license to include an endorsement for bone densitometry by submitting an upgrade request form to the Board's Administrative Office and complying with the following:
 - (a) Submit proof of current and unrestricted certification by a National Certification Organization in bone densitometry; and
 - (b) Pay the License Upgrade Fee required in 0880-15-.02(5).
- (7) Conversion of full x-ray certification to a Full License
 - (a) Individuals who hold a current full x-ray certification issued by the Board of Medical Examiners or Board of Osteopathic Examination will, as of the effective date of these rules, have their certification automatically converted to a Full License issued by the Tennessee Radiologic Imaging and Radiation Therapy Board of Examiners, with the following exceptions:
 1. Individuals who have retired their state certification or whose state certification expired prior to the effective date of these rules shall be required to apply for a new license pursuant to Rule 0880-15-.05.
 2. Individuals who have disciplinary orders issued by the Board of Medical Examiners or Board of Osteopathic Examination, and whose orders are being monitored by the disciplinary coordinator as of the effective date of these rules, shall be required to apply for a new license pursuant to Rule 0880-15-.05. The Board may, in its discretion, issue a license with equivalent terms and conditions.
 - (b) Upgrading Full License:
 1. Individuals who have had their state certification automatically converted to a Full License may upgrade their license to include additional specialty areas without paying the License Upgrade Fee by submitting a Certification Transfer Form obtained from the Board's Administrative Office along with proof of current, unrestricted certification by a National Certification Organization in the applicable specialty area within sixty (60) days from the effective date of these rules.
 2. Individuals who have had their state certification automatically converted to a Full License but failed to upgrade their license within sixty (60) days from the effective date of these rules, can upgrade their license by paying the License Upgrade Fee and by submitting proof of current, unrestricted certification by a National Certification Organization in the applicable specialty area.

Authority: T.C.A. §§ 63-1-161, 63-6-901, 63-6-902 and Public Chapter 1029 of the Public Acts of 2016.

0880-15-.06 Limited License: Obtaining and Upgrading.

- (1) Qualifications: To be eligible for a Limited License a person must meet the following minimum qualifications:
 - (a) Be at least eighteen (18) years of age; and
 - (b) Possess a high school diploma, a GED certificate, or other equivalent document approved by the Board; and
 - (c) Be free from physical or mental impairment which would interfere with the performance of duties or otherwise constitute a hazard to the health and safety of patients; and
 - (d) Cause to be submitted verification of attendance and successful completion of a Board-approved

training course, pursuant to Rule 0880-15-.08(2)(a) through (c), for the type of license sought; and

- (e) Have successfully completed the Board-approved examinations; and
- (f) Cause to be submitted to the Board's Administrative Office, directly from the vendor identified in the Board's licensure application materials, the result of a criminal background check; and
- (g) Have applied for licensure and paid all fees or qualify for a waiver of all initial licensure fees under T.C.A. § 63-1-161.

(2) Examinations:

(a) Eligibility:

- 1. It is the applicant's responsibility to apply directly to the examination agency for admission to the examinations. The Board does not process applications for examination.
- 2. After the fourth (4th) unsuccessful attempt at passing any section of an examination, the Board will not accept a passing score on the examination until the applicant has shown documentation of repeating a Board-approved course that includes classroom instruction in the specialty area attempted.

(b) Required Examinations: Limited License applicants, except for those in bone densitometry, must successfully complete:

- 1. A.R.R.T. core examination; and
- 2. A.R.R.T.'s limited scope examination(s) for the specialty area(s) in which licensure is sought.

(c) Passing Scores: A Limited License applicant will be deemed to have successfully completed any of the examinations required for limited licensure upon correctly answering seventy percent (70%) of all questions contained on the examinations which the Board, or its designee, deems to be appropriate and applicable to the type(s) of license(s) sought.

(3) Application for Limited License:

(a) An applicant shall obtain an application form from the Board's Administrative Office, respond truthfully and completely to every question or request for information contained in the form, and submit it, along with all documentation and fees required by the form and this rule, to the Board's Administrative Office. It is the intent of this rule that all steps necessary to accomplish the filing of the required documentation be completed prior to filing an application and that all documentation be filed simultaneously.

(b) Along with the application, the applicant shall submit:

- 1. The Application and License Fee as provided in Rule 0880-15-.02(1) and the State Regulatory Fee as provided in Rule 0880-15-.02(3), unless the applicant qualifies for a waiver of all initial licensure fees under T.C.A. § 63-1-161; and
- 2. Proof of United States citizenship or evidence of being legally entitled to live or work in the United States; and
- 3. A valid, current, government-issued photo ID; and
- 4. Cause to be submitted to the Board's Administrative Office directly from the radiological educational course director, certification of successful completion of the basic course and any specialty area(s) course(s), pursuant to Rule 0880-15-.08(2)(a) and (b), along with certification from the supervising physician(s) of successful completion of the required

clock hours of clinical training for each separate specialty area applied for pursuant to Rule 0880-15-.08(2)(c).

- (c) Reciprocity: Any person who possesses a current and unencumbered limited certification or license to perform radiologic imaging in another jurisdiction, if that jurisdiction's certification or license standards are substantially equivalent to those provided by this section in accordance with rules promulgated by the Board, may receive a Limited License with applicable endorsements at the Board's discretion upon submitting:
 - 1. The application form; and
 - 2. A certificate of fitness or endorsement from the state(s) in which the applicant holds certification or license; and
 - 3. A copy of all documents necessary to show the educational and procedural requirements for certification or license in all states in which the applicant holds certification or license; and
 - 4. Proof of United States citizenship or evidence of being legally entitled to live or work in the United States; and
 - 5. The result of a criminal background check submitted to the Board's Administrative Office directly from the vendor identified in the Board's licensure application materials; and
 - 6. A valid, current, government-issued photo ID; and
 - 7. The Application and License Fee as provided in Rule 0880-15-.02(1) and the State Regulatory Fee as provided in Rule 0880-15-.02(3), unless the applicant qualifies for a waiver of all initial licensure fees under T.C.A. § 63-1-161.
- (4) Issuance of a license: Upon approval for issuance of license, the Board shall issue a Limited License, with endorsements for the applicable specialty area(s) as reflected by the application materials received.
- (5) Upgrade Limited License: Licensees may upgrade an existing license by submitting an upgrade request form to the Board's Administrative Office and complying with the following:
 - (a) Upgrade to include additional specialty area(s):
 - 1. Cause to be submitted to the Board's Administrative Office directly from the director of a Board-approved specialty area(s) radiological education course(s), documentation indicating the additional clock hours and type of education received pursuant to Rule 0880-15-.08(2)(b) along with certification from the supervising physician(s) of successful completion of the clock hours of clinical training for each separate area in which licensure is sought pursuant to Rule 0880-15-.08(2)(c); and
 - 2. Submit proof of successful completion of all limited scope examination(s) for the specialty area(s) in which licensure is sought; and
 - 3. Pay the License Upgrade Fee required in Rule 0880-15-.02(5).
 - (b) Upgrade to include Bone Densitometry:
 - 1. Cause to be submitted to the Board's Administrative Office directly from the director of a Board-approved bone densitometry educational course, certification of successful completion of the basic course pursuant to Rule 0880-15-.08(3)(a); and
 - 2. Submit the Statement of Training signed by the manufacturer (or authorized representative) or by a person holding a license in bone densitometry who has received machine-specific training on the appropriate machine pursuant to Rule 0880-15-.08(3)(b) through (c); and

3. Submit proof of having successfully completed the A.R.R.T.'s Limited Bone Densitometry Equipment Operators Examination pursuant to Rule 0880-15-.07(2).
4. Pay the License Upgrade Fee required in Rule 0880-15-.02(5).
- (c) Upgrade to Full License: Submit proof of current and unrestricted certification by a National Certification Organization, containing all applicable credentials.
- (6) Conversion of limited x-ray certification to a Limited License:
 - (a) Individuals who hold a current limited x-ray certification issued by the Board of Medical Examiners or Board of Osteopathic Examination will, as of the effective date of these rules, have their state certification automatically converted to a Limited License under the Tennessee Radiologic Imaging and Radiation Therapy Board of Examiners with the following exceptions:
 1. Individuals who retired their state certification or whose state certification expired prior to the effective date of these rules shall be required to apply for a new license pursuant to Rule 0880-15-.06.
 2. Individuals who have disciplinary orders issued by the Board of Medical Examiners or Board of Osteopathic Examination, and whose orders are being monitored by the disciplinary coordinator as of the effective date of these rules, shall be required to apply for a new license pursuant to Rule 0880-15-.06. The board may, in its discretion, issue a license with equivalent terms and conditions.
 - (b) Upgrade Limited License:
 1. Individuals who have had their state certification automatically converted to Limited License may upgrade their license without paying the License Upgrade Fee by submitting a Certification Transfer Form obtained from the Board's Administrative Office and complying with the requirements of Rule 0880-15-.06(5)(a)(1) and (2) or Rule 0880-15-.06(5)(b)(1)-(3) or Rule 0880-15-.07(5)(a)(1)-(2) or Rule 0880-15-.07(5)(b) within sixty (60) days from the effective date of these rules.
 2. Individuals who have had their state certification automatically converted to a Limited License, but who failed to upgrade their license within sixty (60) days from the effective date of these rules, can upgrade their license by paying the License Upgrade Fee and complying with the requirements of Rule 0880-15-.06(5)(a)(1) and (2) or Rule 0880-15-.06(5)(b)(1)-(3) or Rule 0880-15-.07(5)(a)(1)-(2) or Rule 0880-15-.07(5)(b).

Authority: T.C.A. §§ 63-1-161, 63-6-901, 63-6-902 and Public Chapter 1029 of the Public Acts of 2016.

0880-15-.07 Limited License in Bone Densitometry: Obtaining and Upgrading.

- (1) Qualifications: To be eligible for a Limited License in bone densitometry a person must meet the following minimum qualifications:
 - (a) Be at least eighteen (18) years of age; and
 - (b) Possess a high school diploma, a GED certificate, or other equivalent document approved by the Board; and
 - (c) Be free from physical or mental impairment which would interfere with the performance of duties or otherwise constitute a hazard to the health and safety of patients; and
 - (d) Cause to be submitted verification of attendance and successful completion of a Board-approved bone densitometry basic training course pursuant Rule 0880-15-.08(3)(a); and
 - (e) Submit the Statement of Training signed by the manufacturer (or authorized Representative) or

by a person holding a Limited License in bone densitometry who has received machine-specific training on the appropriate machine pursuant to Rule 0880-15-.08(3)(b) through (c); and

- (f) Have successfully completed the Board-approved examination; and
 - (g) Cause to be submitted to the Board's Administrative Office directly from the vendor identified in the Board's licensure application materials, the result of a criminal background check; and
 - (h) Have applied for licensure and paid all fees or qualify for a waiver of all initial licensure fees under T.C.A. § 63-1-161.
- (2) Examination: Limited License applicants in bone densitometry must successfully complete the A.R.R.T.'s Limited Bone Densitometry Equipment Operators Examination or equivalent examination acceptable to the Board.
- (a) It is the applicant's responsibility to apply directly to the examination agency for admission to the examination. The Board does not process applications for examination.
 - (a) Passing Score - An applicant will be deemed to have successfully completed the A.R.R.T.'s Limited Bone Densitometry Equipment Operators Examination upon correctly answering seventy percent (70%) of all questions contained on the examination.
- (3) Application for Limited License in Bone Densitometry:
- (a) An applicant shall obtain an application form from the Board's Administrative Office, respond truthfully and completely to every question or request for information contained in the form, and submit it, along with all documentation and fees required by the form and this rule, to the Board's Administrative Office. It is the intent of this rule that all required documentation and the application be filed simultaneously.
 - (b) Along with the application, the applicant shall submit:
 - 1. The Application and License Fee as provided in Rule 0880-15-.02(1) and the State Regulatory Fee as provided in Rule 0880-15-.2(3), unless the applicant qualifies for a waiver of all initial licensure fees under T.C.A. § 63-1-161; and
 - 2. Proof of United States citizenship or evidence of being legally entitled to live or work in the United States; and
 - 3. A valid, current, government-issued photo ID; and
 - 4. Cause to be submitted to the Board's Administrative Office directly from the director of a Board-approved bone densitometry educational course, certification of successful completion of the basic course pursuant to Rule 0880-15-.08(3)(a); and
 - 5. Submit the Statement of Training signed by the manufacturer (or authorized Representative) or by a person holding a license in bone densitometry who has received machine-specific training on the appropriate machine pursuant to Rule 0880-15-.08(3)(b) through (c).
 - (c) Reciprocity: Any person who possesses a current and unencumbered license to perform bone densitometry in another jurisdiction, if that jurisdiction's standards of competency are substantially equivalent to those provided by this section in accordance with rules promulgated by the Board, may receive a Limited License in bone densitometry at the Board's discretion upon submitting:
 - 1. The application form; and
 - 2. A certificate of fitness or endorsement from the state(s) in which the applicant holds certification or license; and

3. A copy of all documents necessary to show the educational and procedural requirements for certification or license in all states in which the applicant holds certification or license; and
 4. The result of a criminal background check submitted to the Board's Administrative Office directly from the vendor identified in the Board's licensure application materials; and
 5. A valid, current, government-issued photo ID; and
 6. The Application and License Fee as provided in Rule 0880-15-.02(1) and the State Regulatory Fee as provided in 0880-15-.02(3) unless the applicant qualifies for a waiver of all initial licensure fees under T.C.A. § 63-1-161.
- (4) Issuance of a license: Upon approval for issuance of a bone densitometry license, the Board shall issue a Limited License in Bone Densitometry with endorsements for the applicable specialty area(s) as reflected by the application materials received.
- (5) Upgrading Limited License in Bone Densitometry: Licensees may upgrade an existing Limited License in Bone Densitometry by submitting an upgrade request form to the Board's Administrative Office and complying with the following:
- (a) Upgrading to include additional specialty area(s):
 1. Cause to be submitted to the Board's Administrative Office directly from the director of a Board-approved specialty area(s) radiological education course(s), documentation indicating the additional clock hours and type of education received pursuant to Rule 0880-15-.08(2)(a) and (b) along with certification from the supervising physician(s) of successful completion of the clock hours of clinical training for each separate area in which certification is sought pursuant to Rule 0880-15-.08(2)(c).
 2. Have submitted proof of successful completion of A.R.R.T. core examination and the limited scope examination(s) for the specialty area(s) in which licensure is sought.
 3. Pay the License Upgrade Fee required in Rule 0880-15-.02(5).
 - (b) Upgrading to Full License: Submit proof of current and unrestricted certification by a National Certification Organization, containing all applicable specialty area credentials and pay the License Upgrade Fee required in Rule 0880-15-.02(5).
- (6) Conversion of limited x-ray certification in bone densitometry to an equivalent license:
- (a) Individuals who hold current limited x-ray certification in bone densitometry issued by the Board of Medical Examiners or Board of Osteopathic Examination will, as of the effective date of these rules, have their state certification automatically converted to a Limited License in Bone Densitometry under the Tennessee Board of Radiologic Imaging and Radiation Therapy Board of Examiners, with the following exceptions:
 1. Individuals who retired their state certification or whose state certification expired prior to the effective date of these rules shall be required to apply for a new license pursuant to Rule 0880-15-.07.
 2. Individuals who have disciplinary orders issued by the Board of Medical Examiners or Board of Osteopathic Examination, and whose orders are being monitored by the disciplinary coordinator as of the effective date of these rules, shall be required to apply for a new license pursuant to Rule 0880-15-.07. The Board may, in its discretion, issue a license with equivalent terms and conditions.
 - (b) Upgrading Limited License in Bone Densitometry:
 1. Individuals who have had their state certification automatically converted to a Limited

License in Bone Densitometry may upgrade their license without paying the License Upgrade Fee by submitting a Certification Transfer Form obtained from the Board's Administrative Office and complying with the requirements of Rule 0880-15-.07(5)(a)(1) and (2) or 0880-15-.07(5)(b) within sixty (60) days from the effective date of these rules.

2. Individuals who have had their state certification automatically converted to a Limited License in Bone Densitometry, but who failed to upgrade their license within sixty (60) days from the effective date of these rules, can upgrade their license by paying the License Upgrade Fee and complying with the requirements of Rule 0880-15-.07(5)(a)(1) and (2) or 0880-15-.07(5)(b).

Authority: T.C.A. §§ 63-1-161, 63-6-901, 63-6-902 and Public Chapter 1029 of the Public Acts of 2016.

0880-15-.08 Education Course, Approval and Curriculum for Limited License

(1) Course approval

- (a) To be approved to provide Limited License training, the educational course director must obtain Board approval by submitting the following information to the Board's Administrative Office:

1. Location of the course; and
2. Names of physicians, A.R.R.T. technologists, physicists, or other work qualified personnel who are acting as instructors. Individuals with only a limited x-ray license, without further credentials that this rule allows or the Board feels uniquely qualifies them to instruct students in a particular subject, shall not teach or otherwise provide Limited License classroom instruction for formal course approval purposes; and
3. Course description and curriculum, which meets criteria in subparagraphs (2)(a) and (2)(b) of this rule.

- (b) If the substance of the requirements in subparagraph (1)(a) changes, the course provider must submit, within thirty (30) days of the change, a new request for course approval. Course approval may be withdrawn for failure to timely submit the new request and/or for changes that result in the course no longer meeting the requirements of subparagraph (1)(a).

- (c) To remain approved to provide Limited License training, the educational course director must obtain Board approval every two (2) years by submitting the information required in subparagraph (1)(a) along with the graduate pass rate for first-time takers on the examinations during the preceding two-year period. If the Board finds that a course is in violation of any of its statutes or regulations or if the Board finds the course inadequate for licensure purposes, the Board may, at the Board's discretion, withdraw course approval, require the course to implement a corrective action plan, or take other action deemed necessary by the Board. If the Board withdraws course approval, the Board shall notify the course in writing of the date of withdrawal. Applicants who complete their coursework after the date of withdrawal will be ineligible to sit for the exam. The minimum standard for continued course approval shall be based upon at least a seventy percent (70%) graduate pass rate for first time takers on the examinations during the preceding two-year period.

- (2) Curriculum: The following curriculum is mandatory for all Limited License education programs, except for bone densitometry. Course approval shall be based upon the level of radiological education obtainable through the program courses according to the following:

- (a) Basic Course - Defined as the core theory or foundation education basic to radiography. The basic course is prerequisite to any specialty area license but needs to be successfully completed only once. The basic radiological course shall include, but not be limited to, imaging equipment, principles of radiographic exposure, radiation safety, radiographic quality and radiographic image processing. This course shall consist of fifty (50) classroom clock hours.

- (b) Specialty Areas - Defined as the study of radiography of a particular anatomical part including

human structure and function, radiographic positioning and procedures, and evaluation of radiographs. The following specialty areas are defined by the A.R.R.T. limited scope of practice examination content specifications, as amended, and each separate specialty area course shall minimally consist of the following number of classroom clock hours:

1. Chest — ten (10) classroom clock hours;
 2. Extremities —forty (40) classroom clock hours;
 3. Skull and Sinuses — ten (10) classroom clock hours; and
 4. Spine —thirty (30) classroom clock hours.
- (c) Clinical Training - Defined as "hands-on" observation and participation in the production of diagnostic radiographs. Clinical training must be supervised either by a board-eligible radiologist or by a Licensed Physician in conjunction and consultation with a Licensee with at least one (1) year of experience in the applicable discipline. This training shall minimally consist of the following number of clinical clock hours for each specialty area in which licensure is sought:
1. Chest — thirty (30) clinical clock hours;
 2. Extremities — eighty (80) clinical clock hours;
 3. Skull and Sinuses — thirty (30) clinical clock hours; and
 4. Spine — eighty (80) clinical clock hours.
- (3) Bone Densitometry: The following curriculum is mandatory for Limited License education programs in bone densitometry. Course approval shall be based upon the level of radiological education obtainable through the program courses according to the following:
- (a) The Basic Bone Densitometry Training Course - Defined as the core theory or foundation education basic to operation of bone densitometry equipment. This basic course shall include, but not be limited to: radiation protection & safety; principles of exposure of bone densitometry scanning machines; patient care; and anatomy of long bones and spine, including construction of bone, destruction of bone, and measurement of bone mass. This course shall consist of twenty-four (24) clock hours. Completion of this basic course will not qualify anyone for a Limited License in any body area other than bone densitometry. The clinical training obtained pursuant to this rule cannot be utilized as clinical training hours in qualification for Limited License in any other body areas. Clinical bone scanning must be supervised by a Licensed Physician.
- (b) All applicants must have machine-specific training according to the following:
1. The applicant must receive training on the same type machine that they will be operating when licensed.
 2. This machine-specific training may be done by the manufacturer (or authorized representative) or by a person holding a license in bone densitometry and who has received machine-specific training on the appropriate machine.
 3. The machine-specific training shall include, but not be limited to: identification of machine components; operation of machine; exposure doses for various scans from the machine; positioning for each scan procedure; adjusting for errors; image acquisitions; reference databases; and quality control procedures.
- (c) All training must result in a Statement of Training being signed by the manufacturer (or authorized representative) or by a person holding a license in bone densitometry and who has received machine-specific training on the appropriate machine. The Statement of Training shall be issued to the trainee and sent to the Board's Administrative Office.

- (4) The Board's designee may issue initial course approval subject to subsequent Board ratification.

Authority: T.C.A. §§ 63-6-901, 63-6-902 and Public Chapter 1029 of the Public Acts of 2016.

0880-15-.09 Application Review, Approval, Denial, Interviews and Conditioned or Restricted Licensure. Review and decisions on applications for licensure or exemption from licensure shall be governed by this rule.

- (1) The Board's administrative staff shall determine when an application file is complete.
- (2) If an application is incomplete when received by the Board's Administrative Office, the applicant shall be notified of the information required. Except as provided in subparagraph (b), the applicant shall cause the requested information to be received by the Board's Administrative Office on or before the ninetieth (90th) day after the initial letter notifying the applicant of the required information is sent.
- (a) Except as provided in subparagraph (b), if requested information is not timely received, the application file shall be closed and the applicant notified that the Board will not consider licensure or exemption until a new application is received pursuant to the rules governing that process, including another payment of all fees applicable to the applicant's circumstances.
- (b) The ninety (90) day return requirement shall not apply to applications which require action by the United States Citizenship and Immigration Services. Action on those applications pursuant to subparagraph (a) shall not take place until the expiration of six (6) months from the date the applications are received.
- (3) If a completed application is denied, conditioned or restricted by the Board the following shall occur:
- (a) A notification of the denial, condition or restriction shall be sent by the Board's Administrative Office by certified mail, return receipt requested which shall contain all the specific statutory or rule authorities for the denial.
- (b) The notification, when appropriate, shall also contain a statement of the applicant's right to submit a written request for an interview before the Board to contest the denial.
- (4) Any applicant who has successfully complied with all requirements of the rules governing the licensure process for the type of license applied for shall be issued a license to practice in Tennessee with the following exceptions:
- (a) Applicants who by virtue of any criteria for licensure in the areas of mental, physical, moral or educational capabilities, as contained in the application and review process which indicates derogatory information or a potential risk to the public health, safety and welfare may be required to present themselves to the Board, a duly constituted panel of the Board, a Board member, a screening panel when the individual is under investigation or the Board Consultant for an interview before final licensure may be granted.
- (b) The interviews which may be required by paragraph (4)(a) of this rule are considered part of the licensure process.
- (c) The issuance or renewal of licensure to applicants who otherwise may be entitled to full licensure or renewal, may be withheld, denied, conditioned or restricted in any manner the Board deems necessary to protect the public in any of the following circumstances:
1. When an applicant has had licensure disciplinary action taken or is under investigation by another state or territory of the United States for any acts or omissions which would constitute grounds for discipline of a license issued in this state. A certified copy of the initial or final order or other equivalent document memorializing the disciplinary action or investigation from the disciplining state or territory shall constitute prima facie evidence of a violation of this section and be sufficient grounds upon which to deny, restrict or condition licensure or renewal and/or discipline a license issued in this state.

2. When any applicant's application indicates a problem in the areas of mental, physical, moral or educational criteria for licensure or renewal which the Board determines may create a potential threat to the public health, safety or welfare.
3. When any applicant has violated any provision of T.C.A. § 63-6-214(b) or rules promulgated pursuant thereto, or T.C.A. § 63-9-111, or the rules promulgated pursuant thereto.
4. When any applicant fails to fully and timely comply with all licensure application and renewal requirements.

Authority: T.C.A. §§ 63-6-901, 63-6-902 and Public Chapter 1029 of the Public Acts of 2016.

0880-15-.10 Maintaining License, Renewal, Retirement and Reinstatement.

- (1) All Licensees must renew their licenses to be able to legally continue in practice. Renewal is governed by the following:
 - (a) The due date for renewal is the license expiration date, which is the last day of the month in which a Licensee's birthday falls pursuant to the Division of Health Related Boards "biennial birthdate renewal system" contained in Rule 1200-10-01-.10. Individuals previously certified by the Board of Medical Examiners or the Board of Osteopathic Examination, who have had their certifications converted to licenses pursuant to Rule 0880-15-.05(7), Rule 0880-15-.06(6), and Rule 0880-15-.07(6) shall maintain their current renewal cycle.
 - (b) For Full Licenses, proof of certification by a National Certification Organization, which must be current and in good standing, must be provided for renewal and reinstatement.
 - (c) Methods of Renewal - Renewal may be accomplished by one of the following methods:
 1. Internet Renewals - Individuals may apply for renewal and pay the necessary fees via the Internet.
 2. Paper Renewals - Licensees who have not renewed their authorization online via the Internet will have a renewal application form mailed to them at the last address provided by them to the Board prior to the expiration date of their current license. Failure to receive such notification does not relieve the individual of the responsibility of timely meeting all requirements for renewal. To be eligible for renewal, a Licensee must submit to the Division of Health Related Boards on or before the license's expiration date the following:
 - (i) A completed and signed renewal application form, and
 - (ii) The Renewal and State Regulatory Fees as provided in Rule 0880-15-.02.
 - (d) Any renewal application received after the expiration date must be accompanied by the Late Renewal Fee and State Regulatory Fee provided in Rule 0880-15-.02.
 - (e) Any individual who fails to comply with the renewal rules and/or notifications sent to them concerning failure to timely renew shall have their licenses processed pursuant to Rule 1200-10-01-.10.
 - (f) Anyone submitting a signed renewal form, electronically or otherwise, which is found to be fraudulent or untrue may be subject to disciplinary action.
 - (g) Any Licensee who receives notice of failure to timely renew pursuant to Rule 1200-10-01-.10, and who, on or before the last day of the month following the month in which the license expires, executes and files in the Board's Administrative Office an affidavit of retirement pursuant to paragraph (2) of this rule may have their license retired effective on their license's expiration date.

- (2) License retirement

- (a) Licensees who wish to retain their license but not actively practice will not be required to comply with the license renewal process. Licensees wishing to retire their license must do the following:
 - 1. Obtain from, complete, and submit to the Board Administrative Office an affidavit of retirement form.
 - 2. Submit any documentation which may be required by the form to the Board's Administrative Office.
- (b) Upon successful application for retirement of the license with completion and receipt of all proper documentation to the Board's satisfaction, the Board shall register the license as retired. Any person who has a retired license may not practice in Tennessee.
- (3) Reactivation: Any Licensee whose license has been retired or processed pursuant to Rule 1200-10-01-.10 for failure to timely renew may re-enter active practice by doing the following:
 - (a) Fully complete and submit the Board's Reactivation Application along with payment of:
 - 1. For those reactivating a retired license, the License Renewal Fee.
 - 2. For those who are reactivating a license processed pursuant to Rule 1200-10-01-.10 for failure to timely renew, the Renewal Fee and the Late Renewal-reactivation Fee which may not exceed twice the Renewal Fee.
 - (b) Expired Licenses:
 - 1. Full Licenses: to reactivate an expired Full License, the Licensee must submit proof of certification by a National Certification Organization, which must be current and in good standing, along with documentation of successful completion of the continuing education required by the National Certification Organization.
 - 2. Limited Licenses: To reactivate an expired Limited License, the Licensee must submit, along with the Board's Reactivation Application, documentation of successful completion of the continuing education requirements provided in Rule 0880-15-.11 for all the calendar years (January 1 – December 31), or any fraction thereof, that the license was expired that precede the calendar year during which the reactivation is requested. The continuing education hours required to be submitted shall be capped at twenty four (24) hours. An applicant who has been out of clinical practice for more than two years may be required to complete re-entry requirements to be determined by the Board based on the applicant's period of clinical inactivity, record of continuing education, and other relevant factors.
 - (c) Retired Licenses:
 - 1. Full Licenses: to reactivate a retired Full License, the Licensee must submit proof of certification by a National Certification Organization, which must be current and in good standing.
 - 2. Limited Licenses: To reactivate a retired Limited License submit, along with the Board's Reactivation Application, documentation of successful completion of the continuing education requirements provided in Rule 0880-15-.11 for all the calendar years (January 1 – December 31), or any fraction thereof, that the license was retired that precede the calendar year during which the reactivation is requested. The continuing education hours required to be submitted shall be capped at twenty-four (24) hours. An applicant who has been out of clinical practice for more than two years may be required to complete re-entry requirements to be determined by the Board based on the applicant's period of clinical inactivity, record of continuing education, and other relevant factors.

- (d) If requested, after review by the Board or a Board consultant, the applicant shall appear before

either the Board, a duly constituted panel of the Board, or a Board consultant for an interview regarding continued competence in the event of license retirement, administrative revocation or other practice inactivity in excess of two (2) years and meet such other requirements the Board feels necessary to establish current levels of competency.

- (4) Renewal, issuance, and reactivation decisions pursuant to this rule may be made administratively subject to review by the Board or a Board consultant.

Authority: T.C.A. §§ 63-1-107, 63-6-901, 63-6-902 and Public Chapter 1029 of the Public Acts of 2016.

0880-15-.11 Continuing Education

(1) Continuing Education: Hours Required

(a) Full Licenses

1. Submission of continued certification in good standing with any National Certification Organization with the renewal application shall establish compliance with this rule.
2. The Board accepts the standards of National Certification Organizations relative to the number of hours, types of courses, and methods of proving compliance for continuing education for Full Licensees. A Full Licensee will not be required to duplicate the continuing education hours submitted to a National Certification Organization.

(b) Limited Licenses

1. Each Limited Licensee must biennially complete twenty-four (24) hours of radiological-related continuing education in courses approved by the Board or by any of the organizations listed in subparagraph (3)(d). For Licensees who were previously certified by the Board of Medical Examiners or the Board of Osteopathic Examination, the biennial period for continuing education shall begin at the date of their first renewal with the Board of Radiologic Imaging and Radiation Therapy.
2. The Board approves courses for only the number of hours contained in the course. The approved hours of any individual course will not be counted more than once in a two (2) year period toward the required hourly total regardless of the number of times the course is attended or completed by any individual Licensee.

(2) Continuing Education: Proof of Compliance

- (a) The due date for proof of completion of the required continuing education hours is each Licensee's biennial renewal due date.
- (b) Each person must, on a Board provided form, check a box and/or enter a signature which indicates completion of the required continuing education hours and that such hours were obtained during the twenty-four (24) months preceding the Licensee's biennial renewal date.
- (c) Each person must retain proof of completion of all continuing education courses. This documentation must be retained for a period of four (4) years from the end of the calendar year in which the course is completed. This documentation must be produced for inspection and verification, if requested in writing by the Board during its verification process.
- (d) For Full Licensees, certification by a National Certification Organization, which must be current and in good standing, is proof of compliance with continuing education requirements.

(3) Continuing Education: Course Approval

- (a) Courses to be offered to fulfill the required continuing education hours must, unless otherwise provided, receive prior approval from the Board.

- (b) Prior approval of a course may be obtained by submitting the following information to the Board's Administrative Office at least thirty (30) days prior to the scheduled date of the course:
1. A course description or outline
 2. Names of all lecturers
 3. Brief resume of all lecturers
 4. Number of hours of educational credit requested
 5. Date of course
 6. Copies of materials to be utilized in the course
 7. How verification of attendance is to be documented
- (c) Continuing education courses may be presented in any of the following formats:
1. Lecture
 2. Audiovisual - with successful completion of a written post experience examination to evaluate material retention
 3. Correspondence - with successful completion of a written post experience examination to evaluate material retention
 4. Any combination of the above
- (d) The following courses need not receive prior approval and shall constitute Board approved continuing education courses:
1. Courses sponsored or approved by any of the following organizations:
 - (i) American College of Radiology
 - (ii) American Medical Association
 - (iii) American Registry of Radiologic Technologists
 - (iv) American Society of Radiologic Technologists
 - (v) Society of Nuclear Medicine and Molecular Imaging
 - (vi) Tennessee Medical Association
 - (vii) Tennessee Radiological Society
 - (viii) Tennessee Society of Radiologic Technologists
 2. Relevant educational courses sponsored by an accredited school of medicine or radiological health. If such course is taken for or assigned semester or quarter credit hours, three (3) semester hours or equivalent quarter hours shall be equivalent to fifteen (15) continuing education hours. Credits will only be counted for courses successfully passed with an earned grade of C or better.
- (e) A Board consultant is vested with the authority to approve continuing education courses submitted in compliance with this rule. All such approvals must be presented to the full Board for ratification.

- (4) Provision of Volunteer Healthcare Services: A Licensee may satisfy one (1) hour of continuing education through the performance of one (1) hour of volunteer provision of healthcare services. The maximum number of annual hours that can be received by performing volunteer healthcare services is two (2) hours. Evidence of such volunteer healthcare services must include a letter on official letterhead from the sponsoring organization identifying the date that the volunteer healthcare services were completed and the number of volunteer healthcare service hours that were completed.
- (5) Violations
 - (a) Any person who falsely attests to attendance and completion of the required hours of continuing education may be subject to revocation or other disciplinary action.
 - (b) Any person who fails to obtain the required continuing education hours may be subject to revocation or other disciplinary action.
 - (c) Education hours obtained as a result of compliance with the terms of an informal settlement or Board Orders in any disciplinary action shall not be counted toward the continuing education hours required to be obtained by Rule 0880-15-11.

Authority: T.C.A. §§ 63-6-712, 63-6-901, 63-6-902 and Public Chapter 1029 of the Public Acts of 2016.

0880-15-.12 Supervision

- (1) Licensees must practice under the supervision of a Licensed Physician.
- (2) Before being authorized to perform any radiologic imaging or radiation therapy procedures, a copy of the license shall be placed in the Licensee's personnel file to prove appropriate and current licensure.

Authority: T.C.A. §§ 63-6-901, 63-6-902 and Public Chapter 1029 of the Public Acts of 2016.

0880-15-.13 Licensure Discipline and Civil Penalties

- (1) Licensees may be disciplined for violating any provision of the Tennessee Radiologic Imaging and Radiation Therapy Board of Examiners Practice Act (T.C.A. §§ 63-6-901 et seq.) or the rules promulgated pursuant thereto, and for the same causes, to the same extent, and pursuant to the same procedures as contained in T.C.A. § 63-6-214 for the Board of Medical Examiners and in T.C.A. § 63-9-111 for the Board of Osteopathic Examination.
- (2) Upon a finding by the Board that a Licensee has violated any provision of the Tennessee Radiologic Imaging and Radiation Therapy Board of Examiners Practice Act (T.C.A. §§ 63-6-901 et seq.) or the rules promulgated pursuant thereto, the Board may impose any of the following actions separately or in any combination which is deemed appropriate to the offense:
 - (a) Private Censure: This is a written action issued to the Licensee for minor or near infractions. It is informal and advisory in nature and does not constitute a formal disciplinary action.
 - (b) Public censure or reprimand: This is a written action issued to a Licensee for one time and less severe violations. It is a formal disciplinary action.
 - (c) Probation: This is a formal disciplinary action which places a Licensee on close scrutiny for a period of time.
 - 1. This action may be combined with any other formal disciplinary action and include conditions which must be met before probation can be lifted and/or which restrict or condition the licensee's activities during the probationary period.
 - 2. Once ordered, probation may not be lifted unless and until the Licensee petitions and appears, pursuant to paragraph (3) of this rule, before the Board after the period of initial probation has run and all conditions placed on the probation have been met and the Board is satisfied that a further probationary period is not warranted.

- (d) **Licensure Suspension:** This is a formal disciplinary action which suspends a Licensee's right to practice for a fixed period of time. It contemplates the reentry of the Licensee into practice under the license previously issued. Once ordered, a suspension may not be lifted unless and until the Licensee petitions and appears, pursuant to paragraph (3) of this rule, before the Board after the period of initial suspension has run and:
 - 1. All conditions placed on the suspension have been met; and
 - 2. The Board is satisfied that the Licensee is competent to return to practice and that no further period of suspension is warranted.
 - (e) **Revocation with Leave to Apply:** This is a formal disciplinary action which terminates the license previously issued by the Board. It relegates the Licensee to the status possessed prior to initial application for licensure.
 - 1. A revocation of this nature anticipates that if conditions contained in the revocation order are met that person may apply for a new license. This does not guarantee that a new license will be issued unless or until the Board is satisfied that the person is competent to re-enter practice and is not a threat to the public health, safety, or welfare.
 - 2. Petitions for reinstatement of licensure will not be accepted or entertained.
 - 3. Unless a shorter or longer period of time is included in the revocation order, application for a new license will not be accepted or entertained prior to the expiration of at least one (1) year from the effective date of the revocation. Under no circumstances will a new license be issued until the Board is satisfied that the applicant is competent to re-enter practice and has met all the then existing licensure requirements. Former disciplinary actions against a Licensee can and will be considered in any decision on such licensure applications.
 - (f) **Permanent Licensure Revocation:** This is the most severe form of disciplinary action which permanently removes and terminates the license previously issued by the Board. It is the Board's intent that any Licensee whose license is permanently revoked may never practice in Tennessee again. Petitions for reinstatement or new applications for licensure will not be accepted or entertained.
 - (g) **Conditions:** Any action deemed appropriate by the Board to be required of a Licensee in any of the following circumstances:
 - 1. During any period of probation, suspension, or revocation with leave to apply; or
 - 2. As a prerequisite to the lifting of probation or suspension; or
 - 3. As a stand-alone requirement(s) in any disciplinary order.
 - (h) **Civil penalty:** A monetary disciplinary action assessed by the Board pursuant to paragraph (5) of this Rule.
 - (i) **Summary Suspension:** This is a formal preliminary disciplinary action which immediately suspends a Licensee's right to practice until a final disposition of the matter is had after a promptly instituted, full hearing before the Board. This type of suspension is ordered ex parte, pursuant to the notice procedures contained in T.C.A. § 4-5-320 and then only upon a finding by the Board that the public health, safety, or welfare imperatively requires emergency action.
 - (j) **Assessment of costs in disciplinary proceedings** shall be as set forth in T.C.A. § 63-1-144.
- (3) **Order of Compliance:** This procedure is a necessary adjunct to previously issued disciplinary orders and is available only when a petitioner has completely complied with the provisions of a previously issued disciplinary order, including an unlicensed practice civil penalty order, and wishes or is required to obtain

an order reflecting that compliance.

- (a) The Board will entertain petitions for an Order of Compliance as a supplement to a previously issued order upon strict compliance with the procedures set forth in subparagraph (b) in only the following two (2) circumstances:

1. When the petitioner can prove compliance with all the terms of the previously issued order and is seeking to have an order issued reflecting that compliance; or
2. When the petitioner can prove compliance with all the terms of the previously issued order and is seeking to have an order issued lifting a previously ordered suspension or probation.

(b) Procedures

1. The petitioner shall submit a Petition for Order of Compliance, as contained in subparagraph (c), to the Board's Administrative Office that shall contain all of the following:
 - (i) A copy of the previously issued order; and a statement of which provision of subparagraph (a) the petitioner is relying upon as a basis for the requested order; and
 - (iii) A copy of all documents that prove compliance with all the terms or conditions of the previously issued order. If proof of compliance requires testimony of an individual(s), including that of the petitioner, the petitioner must submit signed statements from every individual the petitioner intends to rely upon attesting, under oath, to the compliance. The Board's consultant and administrative staff, in their discretion, may require such signed statements to be notarized. No documentation or testimony other than that submitted will be considered in making an initial determination on, or a final order in response to, the petition.
2. The Board authorizes its consultant and administrative staff to make an initial determination on the petition and take one of the following actions:
 - (i) Certify compliance and have the matter scheduled for presentation to the Board as an uncontested matter; or
 - (ii) Deny the petition, after consultation with legal staff, if compliance with all of the provisions of the previous order is not proven and notify the petitioner of what provisions remain to be fulfilled and/or what proof of compliance was either not sufficient or not submitted.
3. If the petition is presented to the Board the petitioner may not submit any additional documentation or testimony other than that contained in the petition as originally submitted.
4. If the Board finds that the petitioner has complied with all the terms of the previous order an Order of Compliance shall be issued.
5. If the petition is denied either initially by staff or after presentation to the Board and the petitioner believes compliance with the order has been sufficiently proven the petitioner may, as authorized by law, file a petition for a declaratory order pursuant to the provisions of T.C.A. § 4-5-223 and Rule 1200-10-01-.11.

(c) Form Petition

Petition for Order of Compliance

Tennessee Board of Radiologic Imaging and Radiation Therapy

Petitioner's Name:
Petitioner's Mailing Address:
Petitioner's E-Mail Address:
Petitioner's Telephone Number:

Attorney for Petitioner:
Attorney's Mailing Address:
Attorney's E-Mail Address:
Attorney's Telephone Number:

The petitioner respectfully represents, as substantiated by the attached documentation, that all provisions of the attached disciplinary order have been complied with and I am respectfully requesting: (circle one)

1. An order issued reflecting that complains; or
2. An order issued reflecting that compliance and lifting a previously ordered suspension or probation.

Note - You must enclose all documents necessary to prove your request including a copy of the original order. If any of the proof you are relying upon to show compliance is the testimony of any individual, including yourself, you must enclose signed statements from every individual you intend to rely upon attesting, under oath, to the compliance. The Board's consultant and administrative staff, in their discretion, may require such signed statements to be notarized. No documentation or testimony other than that submitted will be considered in making an initial determination on, or a final order in response to, this petition.

Respectfully submitted this the ____ day of ____ 20 ____.

Petitioner's Signature

- (4) Order Modifications: This procedure is not intended to allow anyone under a previously issued disciplinary order, including an unlicensed practice civil penalty order, to modify any findings of fact, conclusions of law, or the reasons for the decision contained in the order. It is also not intended to allow a petition for a lesser disciplinary action, or civil penalty other than the one(s) previously ordered. All such provisions of Board orders were subject to reconsideration and appeal under the provisions of the Uniform Administrative Procedures Act (T.C.A. §§ 4-5-301, et seq.). This procedure is not available as a substitute for reconsideration and/or appeal and is only available after all reconsideration and appeal rights have been either exhausted or not timely pursued. It is also not available for those who have accepted and been issued a reprimand.

- (a) The Board will entertain petitions for modification of the disciplinary portion of previously issued orders upon strict compliance with the procedures set forth in subparagraph (b) only when the petitioner can prove that compliance with any one or more of the conditions or terms of the discipline previously ordered is impossible. For purposes of this rule the term "impossible" does not mean that compliance is inconvenient or impractical for personal, financial, scheduling or other reasons.

- (b) Procedures

1. The petitioner shall submit a written and signed Petition for Order Modification on the form contained in subparagraph (c) to the Board's Administrative Office that shall contain all of the following:
 - (i) A copy of the previously issued order; and
 - (ii) A statement of why the petitioner believes it is impossible to comply with the order as issued; and

- (iii) A copy of all documents that proves that compliance is impossible. If proof of impossibility of compliance requires testimony of an individual(s), including that of the petitioner, the petitioner must submit signed and notarized statements from every individual the petitioner intends to rely upon attesting, under oath, to the reasons why compliance is impossible. No documentation or testimony other than that submitted will be considered in making an initial determination on, or a final order in response to, the petition.
- 2. The Board authorizes the Board Consultant and administrative staff to make an initial determination on the petition and take one of the following actions:
 - (i) Certify impossibility of compliance and forward the petition to the Office of General Counsel for presentation to the Board as an uncontested matter; or
 - (ii) Deny the petition, after consultation with legal staff, if impossibility of compliance with the provisions of the previous order is not proven and notify the petitioner of what proof of impossibility of compliance was either not sufficient or not submitted.
- 3. If the petition is presented to the Board the petitioner may not submit any additional documentation or testimony other than that contained in the petition as originally submitted.
- 4. If the petition is granted a new order shall be issued reflecting the modifications authorized by the Board that it deemed appropriate and necessary in relation to the violations found in the previous order.
- 5. If the petition is denied either initially by staff or after presentation to the Board and the petitioner believes impossibility of compliance with the order has been sufficiently proven the petitioner may, as authorized by law, file a petition for a declaratory order pursuant to the provisions of T.C.A. § 4-5-223 and Rule 1200-10-01-.11.

(c) Form Petition

Petition for Order of Compliance

Tennessee Board of Radiologic Imaging and Radiation Therapy

Petitioner's Name:
Petitioner's Mailing Address:
Petitioner's E-Mail Address:
Petitioner's Telephone Number:

Attorney for Petitioner:
Attorney's Mailing Address:
Attorney's E-Mail Address:
Attorney's Telephone Number:

The petitioner respectfully represents, as substantiated by the attached documentation, the identified provisions of the attached disciplinary order are impossible for me to comply with:

Note - You must enclose all documents necessary to prove your request including a copy of the original order. If any of the proof you are relying upon to show impossibility is the testimony of any individual, including yourself, you must enclose signed statements from every individual you intend to rely upon attesting, under oath, to the reasons why compliance is impossible. No documentation or testimony other than that submitted will be considered in making an initial determination on, or a final order in response to, this petition.

Respectfully submitted this the ___ day of ___, 20__.

Petitioner's Signature

(5) Civil Penalties

(a) Purpose: The purpose of this is to set out a schedule designating the minimum and maximum civil penalties which may be assessed pursuant to T.C.A. § 63-1-134.

(b) Schedule of Civil Penalties

1. A Type A civil penalty may be imposed whenever the Board finds the person who is required to be licensed, permitted or authorized by the Board guilty of a willful and knowing violation of the Practice Act, or regulations promulgated pursuant thereto, to such an extent that there is, or is likely to be an imminent, substantial threat to the health, safety and welfare of an individual client or the public. For purposes of this section, willfully and knowingly practicing as an x-ray operator without a license, or other authorization from the Board is one of the violations of the Practice Act for which a Type A civil penalty is assessable.
2. A Type B civil penalty may be imposed whenever the Board finds the person who is required to be licensed, permitted or authorized by the Board is guilty of a violation of the Practice Act, or regulations promulgated pursuant thereto, in such a manner as to impact directly on the care of patients or the public.
3. A Type C civil penalty may be imposed whenever the Board finds the person who is required to be licensed by the Board, permitted or authorized by the Board is guilty of a violation of the Practice Act, or regulations promulgated pursuant thereto, which are neither directly detrimental to the patients or public, nor directly impact their care, but have only indirect relationship to patient care or the public.

(c) Amount of Civil Penalties

1. Type A Civil Penalties shall be assessed in the amount of not less than \$500 or more than \$1,000.
2. Type B Civil Penalties may be assessed in the amount of not less than \$100 and not more than \$500.
3. Type C Civil Penalties may be assessed in the amount of not less than \$50 and not more than \$100.

(d) Procedures for Assessing Civil Penalties

1. The Division of Health Related Boards may initiate a civil penalty assessment by filing a Memorandum of Assessment of Civil Penalty. The Division shall state in the memorandum the facts and law upon which it relies in alleging a violation, the proposed amount of the civil penalty and the basis for such penalty. The Division may incorporate the Memorandum of Assessment of Civil Penalty with a Notice of Charges which may be issued attendant thereto.
2. Civil Penalties may also be initiated and assessed by the Board during consideration of any Notice of Charges. In addition, the Board may, upon good cause shown, assess a type and amount of civil penalty which was not recommended by the Division.
3. In assessing the civil penalties pursuant to these rules the Board may consider the following factors:
 - (i) Whether the amount imposed will be a substantial economic deterrent to the violator;
 - (ii) The circumstances leading to the violation;

- (iii) The severity of the violation and the risk of harm to the public;
- (iv) The economic benefits gained by the violator as a result of non-compliance; and,
- (v) The interest of the public.

- 4. All proceedings for the assessment of civil penalties shall be governed by the contested case provisions of Title 4, Chapter 5, Tennessee Code Annotated.

Authority: T.C.A. §§ 63-6-901, 63-6-902 and Public Chapter 1029 of the Public Acts of 2016.

0880-15-.14 Officers, Records, Meeting Requests, Replacement License, Consultants, Advisory Ruling, Declaratory Orders, Screening Panels, and Per Diem

- (1) Officers: The Board shall annually elect from its members the following officers who shall hold office for one year or until the election of a successor:
 - (a) Chair – who shall preside over all Board meetings; and
 - (b) Vice Chair – who shall preside over Board meetings in the absence of the Chair
- (2) Records and Requests
 - (a) Minutes of the board meetings and all records, documents, applications, and correspondence will be maintained in the Board's Administrative Offices.
 - (b) All requests, applications, notices, complaints, other communications and correspondence shall be directed to the Board's Administrative Office.
 - (c) Meeting Agenda Deadline - With the exception of documents relating to disciplinary actions, declaratory orders or hearing requests, any requests or inquiries requiring a Board decision or official Board action must be received in the Board's Administrative Office fourteen (14) days prior to a scheduled Board meeting. Requests or inquiries timely received will be retained in the Board's Administrative Office and presented to the Board at the Board meeting. Requests or inquiries not timely received shall be set over to the next Board meeting.
- (3) Requests for Duplicate or Replacement Licenses: Requests for duplicate or replacement licenses must be made in writing to the Board's Administrative Office and be accompanied by the fee provided in Rule 0880-15-.02.
- (4) Consultants: The Board members or another person designated by the Board are individually vested with authority as consultants to the Board to do the following acts:
 - (a) Review and make recommendations on licensure, exemption, renewal, reinstatement and reactivation applications subject to the rules governing those respective applications.
 - (b) Decide the following:
 - 1. What, if any, investigation should be instituted upon complaints received by the Division.
 - 2. Whether a Licensee who is the subject of a complaint received and/or an investigation conducted by the Division is an appropriate candidate pursuant to Board established guidelines for diversion to a professional peer review organization and/or impaired professional association.
 - 3. What, if any, disciplinary actions should be instituted upon investigations conducted by the Division.
 - 4. What, if any, terms of settlements should be offered in formal disciplinary matters based

upon investigations conducted by the Division. A proposed settlement will not become final unless it is subsequently ratified by the Board or a duly constituted panel of the Board.

5. Whether and under what terms a complaint, case or disciplinary action might be settled. A proposed settlement will not become final unless it is subsequently ratified by the Board or a duly constituted panel of the Board.

- (5) The Board authorizes the member who chaired the contested case hearing to make the decisions authorized pursuant to Rule 1360-04-01-.18 regarding petitions for reconsiderations and stays in that case.
- (6) Declaratory Orders: The Board adopts, as if fully set out herein, Rule 1200-10-01-.11, of the Division of Health Related Boards and as it may from time to time be amended, as its rule governing the declaratory order process. All declaratory order petitions involving statutes, rules or orders within the jurisdiction of the Board shall be addressed by the Board pursuant to that rule and not by the Division. Declaratory Order Petition forms can be obtained from the Board's Administrative Office.
- (7) Screening Panels: The Board adopts, as if fully set out herein, Rule 1200-10-01-.13, of the Division of Health Related Boards and as it may from time to time be amended, as its rule governing the screening panel process.
- (8) Per Diem: Each member of the Board shall receive a per diem of one hundred dollars (\$100.00) for each day's service in attending meetings of the Board and other administrative functions of the Board.

Authority: T.C.A. §§ 63-1-138, 63-6-901, 63-6-902 and Public Chapter 1029 of the Public Acts of 2016.

0880-15-.15 Advertising and Other Public Statements

- (1) Definition of public statements. Public statements relate to professional services, products, or publications or to the field of radiologic imaging or radiation therapy. Public statements include but are not limited to paid or unpaid advertising, brochures, printed matter, directory listings, personal resumes or curricula vitae, interviews or comments for use in media statements in legal proceedings, lectures and public oral presentations, and published materials.
- (2) Avoidance of false or deceptive statements. Licensees do not make public statements that are false, deceptive, misleading or fraudulent, either because of what they state, convey, or suggest or because of what they omit, concerning their research, practice or other work activities or those of persons or organizations with which they are affiliated. As examples (and not in limitation) of this standard, Licensees do not make false or deceptive statements concerning (1) their training, experience, or competence; (2) their academic degrees; (3) their credentials; (4) their institutional or association affiliations; (5) their services; (6) the scientific or clinical basis for, or results or degrees of success of their services; (7) their fees; or (8) their publications or research findings.

Authority: T.C.A. §§ 63-1-138, 63-6-901, 63-6-902 and Public Chapter 1029 of the Public Acts of 2016.

0880-15-.16 Professional Ethics

- (1) The Board adopts, as if fully set out herein, and to the extent that it does not conflict with state law, rules, or Board Position Statements, as the Board's Ethical Code, the *ARRT Standards of Ethics*, published by the A.R.R.T. on September 1, 2019.
- (2) In the case of a conflict, the state law, rules, or Board Position Statements shall govern.
- (3) Violation of the Board's Ethical Code shall be grounds for disciplinary action pursuant to T.C.A. § 63-6-902(b).
- (4) A copy of the *ARRT Standards of Ethics* may be obtained from the A.R.R.T. at 1255 Northland Drive, St. Paul, MN 55120, or by phone at 651-687-0048 or on the A.R.R.T. website.

Authority: T.C.A. §§ 63-1-138, 63-6-901, 63-6-902 and Public Chapter 1029 of the Public Acts of 2016.

* If a roll-call vote was necessary, the vote by the Agency on these rulemaking hearing rules was as follows:

Board Member	Aye	No	Abstain	Absent	Signature (if required)
Pamela Ward	X				
Jennifer Thompson	X				
Kae Fleming	X				
Karen Munyon	X				
Patrick Brazan	X				
Gary Podgorski	X				
Chester Ramsey				X	
Spencer Madell				X	

I certify that this is an accurate and complete copy of rulemaking hearing rules, lawfully promulgated and adopted by the Tennessee Board of Radiologic Imaging and Radiation Therapy on 10/12/2021, and is in compliance with the provisions of T.C.A. § 4-5-222.

I further certify the following:

Notice of Rulemaking Hearing filed with the Department of State on: 07/16/2021

Rulemaking Hearing(s) Conducted on: (add more dates). 10/12/2021

Date: 2/08/2022

Signature: Francine Baca-Chavez


Name of Officer: Francine Baca-Chavez

Title of Officer: Deputy General Counsel, Department of Health

Agency/Board/Commission: Tennessee Board of Radiologic Imaging and Radiation Therapy

Rule Chapter Number(s): 0880-15

All rulemaking hearing rules provided for herein have been examined by the Attorney General and Reporter of the State of Tennessee and are approved as to legality pursuant to the provisions of the Administrative Procedures Act, Tennessee Code Annotated, Title 4, Chapter 5.


Herbert H. Slatery III
Attorney General and Reporter
2/24/2022
Date

Department of State Use Only

Filed with the Department of State on: 3/8/2022

Effective on: 6/6/2022



Tre Hargett
Secretary of State

RECEIVED

MAR 08 2022

Secretary of State
Division of Publications

Public Hearing Comments

One copy of a document that satisfies T.C.A. § 4-5-222 must accompany the filing.

Comment: James Coffin from ARMIRIT (American Registry of Magnetic Resonance Imaging Technologists) commented that his concern is that the rules will exclude MRI Techs certified with the ARMIRIT because MRI does not use ionizing radiation. He believes that the rules do not contemplate licensing MRI techs certified with the ARMIRIT.

Response: Ms. Munyon asked a couple of questions about MRI techs in ARMIRIT in the US and how many MRI techs outside ARMIRIT. Mr. Coffin answered 2300 within ARMIRIT and didn't know the answer to how many are outside the ARMIRIT. Dr. Podgorski responded to Mr. Coffin that the Board's mission is public safety and the Board does not want to be inclusive. He stated that the Board could make it work for MRI techs to be licensed by the Board. Ms. Munyon noted that the Board could include MRI techs in licensure through the definition of National Certification Organization.

Comment: Edward Dowrick an MRI tech certified with ARMIRIT. He was unsure how the rules would affect him and if they would allow him to practice. He wanted to know if he needed to be licensed.

Response: Board member Patrick Brazan asked if you can get MRI training without going to x-ray school. Mr. Dowrick answered yes. Board Member Munyon stated that the rules contemplated that applicants would be licensed in the modality that was contained in their application materials, and an MRI tech would be issued a license with the MRI endorsement on the license. Ms. Munyon also responded that Mr. Dowrick would need to be licensed under these rules.

Comment: Donna Smith – Radiology Education Seminars. She pointed out that the current rules do not include a provision to address bone density techs that were grandfathered in in the rules under the Board of Medical Examiners. It is something the current Board will need to address. She did not have a specific suggestion, but just wanted to point out the issue.

Response: Karen Munyon asked how many people were in such a situation. Dr. Rene Saunders discussed ways that such people would and would not be able to be licensed under the proposed rules.

Comment: Written comments from the American Registry of Radiologic Technicians and the American Society of Radiologic Technicians generally supported the rules but asked that the International Society for Clinical Densitometry be included in the organizations which could provide the examination for limited licenses in bone densitometry.

Response: Kae Fleming opined that it was a good idea and that a provision in the rules should be added to allow the board to recognize certain organizations to provide the test.

Motion by Kae Fleming to adopt the proposed rules with the only addition being "or equivalent examination acceptable to the Board" to rule .07(2).

Motion passed unanimously by roll call vote: Pamela Ward, Jennifer Thompson, Kae Fleming, Karen Munyon, Patrick Brazan, and Gary Podgorski.

Regulatory Flexibility Addendum

Pursuant to T.C.A. §§ 4-5-401 through 4-5-404, prior to initiating the rule making process, all agencies shall conduct a review of whether a proposed rule or rule affects small business.

- (1) **The extent to which the rule or rules may overlap, duplicate, or conflict with other federal, state, and local governmental rules.**

These rules do not overlap, duplicate, or conflict with other federal, state, and local government rules.

- (2) **Clarity, conciseness, and lack of ambiguity in the rule or rules.**

These rules establish clarity, conciseness, and lack of ambiguity.

- (3) **The establishment of flexible compliance and/or reporting requirements for small businesses.**

These rules do not contain compliance or reporting requirements for small businesses.

- (4) **The establishment of friendly schedules or deadlines for compliance and/or reporting requirements for small businesses.**

These rules do not contain compliance or reporting requirements for small businesses.

- (5) **The consolidation or simplification of compliance or reporting requirements for small businesses.**

These rules do not contain compliance or reporting requirements for small businesses.

- (6) **The establishment of performance standards for small businesses as opposed to design or operational standards required in the proposed rule.**

These rules do not establish performance, design, or operational standards for small businesses.

- (7) **The unnecessary creation of entry barriers or other effects that stifle entrepreneurial activity, curb innovation, or increase costs.**

These rules do not create unnecessary barriers or other effects that stifle entrepreneurial activity, curb innovation or increase costs.

Impact on Local Governments

Pursuant to T.C.A. §§ 4-5-220 and 4-5-228, "On any rule and regulation proposed to be promulgated, the proposing agency shall state in a simple declarative sentence, without additional comments on the merits or the policy of the rule or regulation, whether the rule or regulation may have a projected financial impact on local governments. The statement shall describe the financial impact in terms of increase in expenditures or decrease in revenues."

The proposed rules should not have a financial impact on local governments.

Additional Information Required by Joint Government Operations Committee

All agencies, upon filing a rule, must also submit the following pursuant to T.C.A. § 4-5-226(i)(1).

- (A) A brief summary of the rule and a description of all relevant changes in previous regulations effectuated by such rule;

T.C.A. 63-6-901, et seq., created the Radiologic Imaging and Radiation Therapy Board of Examiners and required this board to license and regulate the operators of radiologic imaging and radiation therapy equipment in hospitals, outpatient diagnostic centers, recuperation centers, physicians' offices, or any other setting for human subjects. These will be the initial rules for the Radiologic Imaging and Radiation Therapy Board of Examiners.

- (B) A citation to and brief description of any federal law or regulation or any state law or regulation mandating promulgation of such rule or establishing guidelines relevant thereto;

T.C.A. 63-6-901, et seq., created the Radiologic Imaging and Radiation Therapy Board of Examiners and required this board to license and regulate the operators of radiologic imaging and radiation therapy equipment in hospitals, outpatient diagnostic centers, recuperation centers, physicians' offices, or any other setting for human subjects. These will be the initial rules for the Radiologic Imaging and Radiation Therapy Board of Examiners.

- (C) Identification of persons, organizations, corporations or governmental entities most directly affected by this rule, and whether those persons, organizations, corporations or governmental entities urge adoption or rejection of this rule;

These rules will affect all radiologic imaging and radiation therapy professionals ("x-ray operators") in Tennessee. It will also affect the persons and entities employing x-ray operators because they will have to ensure that they are employing licensed personnel.

- (D) Identification of any opinions of the attorney general and reporter or any judicial ruling that directly relates to the rule or the necessity to promulgate the rule;

None.

- (E) An estimate of the probable increase or decrease in state and local government revenues and expenditures, if any, resulting from the promulgation of this rule, and assumptions and reasoning upon which the estimate is based. An agency shall not state that the fiscal impact is minimal if the fiscal impact is more than two percent (2%) of the agency's annual budget or five hundred thousand dollars (\$500,000), whichever is less;

These rules should not impact revenues or expenditures.

- (F) Identification of the appropriate agency representative or representatives, possessing substantial knowledge and understanding of the rule;

Francine Baca-Chavez, Deputy General Counsel, Department of Health

- (G) Identification of the appropriate agency representative or representatives who will explain the rule at a scheduled meeting of the committees;

Francine Baca-Chavez, Deputy General Counsel, Department of Health

- (H) Office address, telephone number, and email address of the agency representative or representatives who will explain the rule at a scheduled meeting of the committees; and

Department of Health, Office of General Counsel, 665 Mainstream Drive, 2nd Floor, Nashville, TN 37243, 615-741-1611, Francine.Baca-Chavez@tn.gov

(I) Any additional information relevant to the rule proposed for continuation that the committee requests.

None.