



- 5) Provides the Radiologic Health Branch (RHB) within the Department of Public Health (DPH) with responsibility for administering and enforcing the Radiologic Technology Act (RT Act). Requires DPH to approve RT schools, to certify RTs who satisfactorily completed a course in an approved RT school, and prohibits individuals other than those certified by DPH to use the designation “certified RT.” (Health and Safety Code (HSC) §§ 106955 *et seq.*)
- 6) Requires DPH to appoint a certification committee (RT Committee) to assist, advise, and make recommendations on regulations. (HSC § 114855)
- 7) Authorizes a certified RT under the direct supervision of a licensed physician and surgeon, and in accordance with certain facility protocols, to perform venipuncture in an upper extremity to administer contrast materials, as specified. (HSC § 106985)
- 8) Specifies that a healing arts licensees certified by an examining board in radiology recognized by the DPH shall be granted a certificate to supervise the operation of X-ray machines and to operate X-ray machines without restrictions. (HSC § 107111)

**This bill:**

- 1) Establishes the RA Committee under MBC until January 1, 2023 tasked with identifying the appropriate training, qualifications, and scope of practice for individuals providing assistance to radiologists, defined as MBC licensed physicians and surgeons certified or eligible for certification by the American Board of Radiology.
- 2) Specifies RA Committee membership and appointing authority, including representatives from the DPH RT Committee, Department of Veterans Affairs, RT and RA training programs, and RT profession.
- 3) Requires the RA Committee to research and recommend potential statutory changes to grant expanded practice authority to certified RTs or MAs working under the supervision of a radiologist. Requires the RA Committee to analyze the effectiveness MA and RA laws and practice; to determine the appropriateness of specialty MA licensure; to determine necessary revisions to MBC’s MA regulations to promote workforce development in the field and ensure patient access to services; to evaluate, if appropriate, the regulatory recognition of RAs in other states; and to evaluate where equivalencies in military training and experience exist and where the transfer of skills gained through military service may be utilized in determining the requirements for work in radiographic technology, including as a RA, and in the MA field.
- 4) Requires the RA Committee to submit a report on or before January 1, 2022.

**FISCAL EFFECT:** Unknown. This bill is keyed fiscal by Legislative Counsel.

**COMMENTS:**

1. **Purpose.** This bill is sponsored by the American Registry of Radiologic Technologists. According to the Author, “many of our veterans transitioning back

into civilian life have training that exceeds a traditional technician's training. I hope this advisory committee finds actionable data that California can use to help veterans and similarly trained civilians obtain licensure in this expanding medical practice."

2. **Radiologist Assistants.** According to information provided by the Sponsors, RAs, include individuals registered with the American Registry of Radiologic Technologists (known as RRAs) and individuals certified by the Certification Board for Radiology Practitioner Assistants (RPAs). According a 2014 article in the journal Radiologic Technology (the scholarly journal of the American Society of RTs), compared with the careers of physician assistants and nurse practitioners, the RA is relatively new to the field of medicine, with the first training programs developed in the 1970s and the first advanced practice imaging program developed in 1996. Discussions among the American College of Radiology, the American Society of Radiologic Technologists, and the American Registry of Radiologic Technologists culminated in a 2003 consensus statement that defined a RA as an advanced level RT who works under the supervision of a radiologist by assisting in the diagnostic imaging setting, including performing patient assessment, patient management, and certain imaging procedures. RAs do not interpret radiologic examinations. These are in essence advance practice RTs with additional educational training and commensurate additional certification beyond that obtained as a RT. Some states in turn allow for expanded practice authority through licensure of RAs that reflects this more advanced level of training, experience, and passage of a certification examination.
3. **Medical Assistants.** Medical assisting professions have been highlighted as some of the fastest growing employment categories by entities like the United States Bureau of Labor Statistics. MAs are unlicensed personnel who work in health care practitioner offices and are authorized under BPC Section 2069 to administer medication (only by intradermal, subcutaneous, or intramuscular injections), perform skin tests and perform basic administrative, clerical and technical supportive services when conditions regarding supervision, training, specific authorization and records are met.

A MA must receive training either directly from a physician, surgeon, podiatrist, registered nurse, licensed vocational nurse, physician assistant or a qualified MA. Alternatively, a MA may receive training from a secondary, postsecondary or adult education program in a public school authorized by the Department of Education, in a community college program, or a postsecondary institution accredited by an accreditation agency recognized by the United States Department of Education or approved by the Bureau for Private Postsecondary Education.

While MAs are not required to be licensed or register with MBC like other allied health professionals within MBC's jurisdiction, they may be certified by a national certifying body

MAs can be supervised by physicians, podiatrists or optometrists. Additionally, they may work under the direct supervision of a physician assistant, nurse practitioner or nurse midwife when the supervising physician or surgeon is not on site, only if the physician or surgeon has created a written protocol for the activities of the MA.

MAs must receive specific authorization before providing any technical services. This authorization may be in the form of a specific written order or standing order prepared by the supervising physician or podiatrist. The order must include an authorization for the procedure to be performed and it must be noted in the patient's medical record.

MAs are required to document all technical supportive services in the patient's record. In addition, when practicing under the supervision of a physician assistant, nurse practitioner or nurse midwife, the delegation of supervision from the physician or podiatrist to the physician assistant, nurse practitioner or nurse midwife, must be documented in a written standard protocol.

While MBC does not formally oversee MAs as licensees or registrants, the Act specifies that MAs must be at least 18 years old and meet minimum training as outlined in standards established by MBC. MBC does approve certifying organizations that provide certification to medical assistants.

4. **MBC Committees.** MBC performs a great deal of work in committees and currently has six standing committees, five two-member task forces or issue specific committees, two panels and one council that assist with the MBC's work. MBC committees may meet on an as-needed basis and may meet outside of the cycle of when quarterly MBC meetings are held, offering an easier pathway for interested parties to weigh in on a particular issue. The committee structure also allows committee members to have an expanded discussion on a noteworthy topic and potentially make a decision that moves forward as a formal recommendation to MBC for consideration at a MBC meeting. Pursuant to the MBC's strategic plan, MBC must convene every other year to discuss the purpose of each committee and reevaluate the need for the committees/subcommittees/task forces created by the MBC. MBC currently has:

- Application Review and Special Programs Committee. Statutorily mandated, the committee evaluates the credentials of certain licensure applicants (such as those claiming postgraduate training hardship or those requesting a waiver from the written licensing exam waiver to determine their eligibility for licensure). The committee also provides guidance, recommendations and expertise regarding special program laws and regulations, specific applications, medical school site visits, and other issues of concern to the chief of licensing.
- Special Faculty Permit Review Committee. The purpose of this statutorily mandated committee is to evaluate the credentials of internationally trained physicians sponsored by a California medical school to determine if he or she is academically eminent in his or her field of specialty and should be issued a Special Faculty Permit under Section 2168 of the Business and Professions Code (BPC), which authorizes the physician to practice with all the rights and privileges of a California medical license in the sponsoring medical school and its formally affiliated hospitals. The committee submits a recommendation to MBC for each proposed candidate for final approval or denial.

- Midwifery Advisory Council. The Council is statutorily defined in BPC Section 2509 and serves as a formal, permanent body to provide MBC with input from those in the midwifery profession as well as to develop solutions to various regulatory, policy and procedure issues regarding the licensure and regulation of midwives by MBC.
- Panels A and B. Panels created under the MBC's statutory authority in BPC 2008 to appoint panels from its members to evaluate appropriate disciplinary actions. Panel A considers actions related to physicians with a last name starting with A-L and Panel B considers actions related to physicians with a last name starting with M-Z.
- Executive Committee. The Executive Committee's purpose is to oversee various administrative functions of the MBC such as budgets and personnel, strategic planning and reviewing legislation.
- Licensing Committee. The Licensing Committee serves as an expert resource and advisory body to MBC members and the MBC licensing program by educating MBC members and the public on the licensing process.
- Enforcement Committee. The Enforcement Committee is an expert resource and advisory body to MBC members and the MBC enforcement program, educating MBC members and the public on enforcement processes. It also serves to identify program improvements in order to enhance protection of healthcare consumers and review enforcement regulations, policies and procedures, and the MBC's Vertical Enforcement and Prosecution Model.
- Public Outreach, Education and Wellness Committee. The Public Outreach, Education and Wellness Committee develops informational materials on important issues that MBC, develops and monitors MBC's outreach plan, monitors MBC's strategic communications plan and develops physician wellness information by identifying available activities and resources that renew and balance a physician's personal and professional life.
- Editorial Committee. The Editorial Committee reviews MBC's Newsletter articles to ensure they are appropriate for publication and provides any necessary edits to the articles.
- Midwifery Task Force. The Midwifery Task Force reviews current laws and regulations for licensed midwives and acts as a liaison with the Midwifery Advisory Council on issues that may come before MBC.
- Prescribing Task Force. The Prescribing Task Force's aim is to identify ways to proactively approach and find solutions to the epidemic of prescription drug misuse, abuse and overdoses, as well as inappropriate prescribing of prescription drugs, through education, prevention, best practices, communication and outreach.

- Sunset Review Task Force. The Sunset Review Task Force meets with MBC's executive director and deputy director to review sunset review questions and responses.
- Demographic Study Task Force. Established in January 2017, the Demographic Study Task Force will look into a recent report issued by the California Research Bureau that found some disparities in MBC disciplinary actions.
- Compounding Task Force. While it has yet to meet, the goal for the Compounding Task Force is to work with the Board of Pharmacy on the issue of physician's performing compounding services.
- Stem Cell and Regenerative Therapy Task Force. This Task Force held one interested parties meeting in the fall of 2019 to discuss MBC's authority for regenerative and stem cell therapy, including consumer protection. Discussions focused on driving standards for regenerative medicine treatment, the standard of care when delivering treatment, national policy recommendations and input from other state medical boards, and whether MBC should establish guidelines.

5. **Arguments in Support.** The American Registry of Radiologic Technologists believes that SB 480 is an important step and notes that in 31 states, RAs have been a valued member of the medical delivery team as physician extenders for radiologists.

The California Radiological Society, some 2000 board certified physicians who provide diagnostic radiology, radiation oncology, and interventional radiology services, write that RAs have been recognized as valuable physician extenders for radiologists and a valuable tool to address growing radiology workforce issues. The organization states that this bill would create a process to identify the appropriate training for RTs and would help address the growing issue of workforce capability and the complexity of radiology and imaging practice with the volume of images to be reviewed.

6. **Technical Amendments to Correct Drafting Errors Are Necessary.** The January 9 amendments to this measure establishing the RA Advisory Committee were intended to replace provisions in the bill establishing RA licensure under a MBC committee. In order to reflect the Author's intention that the bill solely establish an Advisory Committee to explore licensure, the bill should be amended to strike all reference to licensure and scope of practice other than the investigation on those matters the Advisory Committee will undertake (*see attached mockup beginning on Page 8 of this analysis*).

**SUPPORT AND OPPOSITION:**

Support:

American Registry of Radiologic Technologists (Sponsor)  
California Radiological Society

Opposition:

None on file as of January 9, 2020.

**-- END --**

## MOCKUP AS PROPOSED TO BE AMENDED

## SENATE BILL

## No. 480

## Introduced by Senator Archuleta

February 21, 2019

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An act to add and repeal Section 2072 of, ~~and to add Chapter 8.5 (commencing with Section 3800) to Division 2 of of,~~ the Business and Professions Code, relating to healing arts.

## LEGISLATIVE COUNSEL'S DIGEST

SB 480, as amended, Archuleta. Radiologist assistants. *Assistant Advisory Committee.*

Existing law, the Medical Practice Act, provides for the licensure and regulation of physicians and surgeons by the Medical Board of California. The act authorizes a medical assistant, as defined, to perform specified treatment activities under designated conditions, and requires the board to adopt and administer regulations that establish standards for technical supportive services that medical assistant is authorized to perform. Existing law, the Radiologic Technology Act, provides for the certification and regulation of radiologic technologists by the State Department of Public Health.

~~This bill would establish the Radiologist Assistant Practice Act, to be administered by the Radiologist Assistant Committee of the Medical Board of California, which would be established by the bill. The bill would establish the duties of the committee, including considering the qualifications of individuals who apply for licensure under the act and granting licenses, and would specify duties of the Medical Board of California, including establishing reasonable fees for licensure and license renewal, to be deposited in the Radiologist Assistant Fund, which would be established by the bill. The bill would require money in the fund to be available upon appropriation by the Legislature to implement and administer the provisions of the act. The bill would establish requirements for licensure as a radiologist assistant, including completion of an approved education program and passing an examination. The bill would prescribe requirements for supervision of a radiologist assistant by a radiologist, would prohibit a radiologist assistant from performing specified acts, and would make a violation of the act's provisions a misdemeanor, and, under specified circumstances, subject to a specified civil penalty. By creating a new crime, the bill would impose a state-mandated local program.~~

The bill, until January 1, 2023, would require the board to establish the Radiologist Assistant Advisory Committee for the purpose of identifying the appropriate training, qualifications, and scope of practice for individuals providing assistance to radiologists. The bill would require the advisory committee to research and recommend potential statutory changes to grant expanded practice authority to certified radiologic technologists or medical assistants working under the supervision of a radiologist, as specified, and would require the advisory committee to submit a report of the research



and recommendations of the advisory committee to the board, the Governor, and the Legislature on or before January 1, 2022. The bill would require the Medical Board of California and the Department of Public Health to adopt regulations to implement these recommendations.

~~The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.~~

~~This bill would provide that no reimbursement is required by this act for a specified reason.~~

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: ~~yes~~. no

The people of the State of California do enact as follows:

P2 1 SECTION 1. Section 2072 is added to the Business and  
2 Professions Code, to read:  
3 2072. (a) The board shall establish the Radiologist Assistant  
4 Advisory Committee for the purpose of identifying the appropriate  
5 training, qualifications, and scope of practice for individuals  
6 providing assistance to radiologists.

- P3 1 (b) For purposes of this section, “radiologist” means a  
2 physician and surgeon licensed by the board who is certified or  
3 eligible for certification by the American Board of Radiology.
- 4 (c) The Radiologist Assistant Advisory Committee shall be  
5 composed of the following:
- 6 (1) Two members of the board who shall be appointed by the  
7 board.
- 8 (2) One member of the Department of Public Health Radiologic  
9 Technology Certification Committee who shall be appointed by  
10 the Director of Public Health.
- 11 (3) One representative from the California Department of  
12 Veterans Affairs with direct experience assisting veterans in  
13 utilizing military training and experience for civilian job and  
14 career opportunities who shall be appointed by the Secretary of  
15 the California Department of Veterans Affairs.
- 16 (4) Two radiologists, at least one of whom is representative of  
17 the hospital practice of radiology, who shall be appointed by the  
18 Governor.
- 19 (5) Two radiologic technologists who have been certified  
20 pursuant to Section 114870 of the Health and Safety Code for at  
21 least five years who shall be appointed by the Governor.
- 22 (6) Two representatives of a radiologic technology training  
23 program or radiologist assistant training program who shall be  
24 appointed by the Governor.
- 25 (7) One member who shall be appointed by the Speaker of the  
26 Assembly.
- 27 (8) One member who shall be appointed by the Senate  
28 Committee on Rules.
- 29 (d) The Radiologist Assistant Advisory Committee shall research  
30 and recommend potential statutory changes to grant expanded  
31 practice authority to certified radiologic technologists or medical  
32 assistants working under the supervision of a radiologist by doing  
33 all of the following:
- 34 (1) Analyzing the effectiveness of the practice of medical  
35 assistants authorized pursuant to this chapter and the practice of  
36 radiologist assistants ~~authorized pursuant to Chapter 8.5~~  
37 ~~(commencing with Section 3800).~~
- 38 (2) Determining the appropriateness of specialty medical  
39 assistant licensure.

P4 1 (3) Determining necessary revisions, if any, to regulations  
2 adopted pursuant to Sections 2071 and 3817 to promote workforce  
3 development in the field and ensure patient access to services.

4 (4) Evaluating, if appropriate, the regulatory recognition of  
5 radiologist assistants in other states.

6 (5) Evaluating where equivalencies in military training and  
7 experience exist and where the transfer of skills gained through  
8 military service may be utilized in determining the requirements  
9 for work in radiographic technology, including as a radiologist  
10 assistant, and in the medical assistant field.

11 (e) Members of the Radiologist Assistant Advisory Committee  
12 shall serve without compensation.

13 (f) (1) The Radiologist Assistant Advisory Committee shall  
14 submit a report that includes the research and recommendations  
15 specified in subdivision (d) to the board, the Governor, and the  
16 Legislature on or before January 1, 2022. Any reports submitted  
17 pursuant to this subdivision shall be submitted in compliance with  
18 Section 9795 of the Government Code.

19 (2) The Radiologist Assistant Advisory Committee shall serve  
20 in an advisory capacity, but the board and Department of Public  
21 Health shall adopt regulations to implement relevant  
22 recommendations and information contained in the report required  
23 by paragraph (1).

24 (g) This section shall be repealed on January 1, 2023.

25 ~~SECTION 1.~~

26 ~~SEC. 2. Chapter 8.5 (commencing with Section 3800) is added~~  
27 ~~to Division 2 of the Business and Professions Code, to read:~~

28 -  
29 ~~CHAPTER 8.5. RADIOLOGIST ASSISTANT PRACTICE ACT~~

30 -  
31 ~~Article 1. General Provisions~~

32 -  
33 ~~3800. This chapter shall be known and cited as the Radiologist~~  
34 ~~Assistant Practice Act.~~

35 ~~3801. This article does not apply to any of the following:~~

36 ~~(a) A radiologist assistant trainee or a student enrolled in a~~  
37 ~~radiologist assistant approved educational program.~~

38 ~~(b) A radiologist assistant employed in the service of the federal~~  
39 ~~government while performing duties incident to that employment.~~

P5—1 ~~(c) A health care professional, technician, or other assistant or~~  
2 ~~employee of a physician and surgeon who performs delegated~~  
3 ~~tasks in the office of a physician and surgeon, but who does not~~  
4 ~~render services as a radiologist assistant or profess to be a~~  
5 ~~radiologist assistant.~~

6 ~~3802. This act grants a supervising radiologist or radiologist~~  
7 ~~designee the authority to delegate, as the radiologist determines is~~  
8 ~~appropriate, those tasks or services the radiologist typically~~  
9 ~~performs and is qualified to perform.~~

10 ~~3803. This act does not grant authority to a radiologist assistant~~  
11 ~~to function independently of a radiologist's supervision.~~

12 ~~3804. (a) "Approved educational program" means an~~  
13 ~~educational program for radiologist assistants approved by the~~  
14 ~~committee.~~

15 ~~(b) "Board" means the Medical Board of California.~~

16 ~~(c) "Committee" means the Radiologist Assistant Committee~~  
17 ~~established by this act. *chapter.*~~

18 ~~(d) "Interpret" means to identify and classify a medical image~~  
19 ~~pattern that results in the creation of a final diagnosis and final~~  
20 ~~report.~~

21 ~~(e) "Radiologist assistant" means an individual who meets the~~  
22 ~~qualifications of, and is licensed under, this act. *chapter.*~~

23 ~~(f) "Radiologist designee" means a physician and surgeon who~~  
24 ~~works, or is trained, in the same practice area as the practice area~~  
25 ~~of the supervising radiologist and to whom responsibility for the~~  
26 ~~supervision of a radiologist assistant is temporarily designated~~  
27 ~~when the supervising radiologist is unavailable.~~

28 ~~(g) "Supervising radiologist" means a physician and surgeon~~  
29 ~~licensed by the board and certified by the American Board of~~  
30 ~~Radiology who supervises, and is responsible for, a radiologist~~  
31 ~~assistant.~~

32 ~~(h) "Supervision" means overseeing the activities of and~~  
33 ~~accepting responsibility for, the medical services rendered or~~  
34 ~~performed by a radiologist assistant. The term includes the use of~~  
35 ~~protocols, guidelines, levels of supervision, and standing orders~~  
36 ~~developed or approved by the supervising radiologist.~~

37 ~~(i) "Trainee" means an individual who is currently enrolled in~~  
38 ~~an approved radiologist assistant program.~~

## Article 2. Administration

~~3811. There is established a Radiologist Assistant Committee of the Medical Board of California. The committee shall consist of five members appointed by the governor for three-year terms as follows:~~

~~(a) Three radiologist assistants who are residents of the state, have at least two years of experience as radiologist assistants, and are licensed or meet the requirements for licensure under this chapter.~~

~~(b) One radiologist licensed in this state who supervises the practice of radiologist assistants.~~

~~(c) One public member who is not associated with radiologist assistants in any way other than as a consumer.~~

~~3812. A radiologist assistant appointed to the committee is required to continue to practice as a radiologist assistant while serving as a member of the committee. A member of the committee may be removed by the Governor for misconduct, neglect of duty, or incompetence.~~

~~3813. The initial terms of appointment of the members of the committee shall be as follows:~~

~~(a) One radiologist assistant for a one-year term.~~

~~(b) One radiologist assistant for a two-year term.~~

~~(c) One radiologist assistant for a three-year term.~~

~~(d) One radiologist for a two-year term.~~

~~(e) One public member for a three-year term.~~

~~3814. (a) The committee shall have regular meetings, called upon the request of the president of the board or by a majority of the members appointed to the committee, and upon the advice and consent of the executive director of the board for the transaction of business that comes before the committee under this article.~~

~~(b) At the first committee meeting of each calendar year, the committee shall elect a chief and any other officer considered necessary by the committee by an affirmative vote of a majority of the members appointed to the committee.~~

~~3815. Three members of the committee constitute a quorum. An affirmative vote of a majority of the members appointed to the committee is required for the committee to take action on any business.~~

P7 1 ~~3816. It shall be the duty of the committee to do all of the~~  
2 ~~following:~~

3 ~~(a) Consider the qualifications of individuals who apply for an~~  
4 ~~initial license under this article.~~

5 ~~(b) Approve or reject license applications and license renewal~~  
6 ~~applications.~~

7 ~~(c) Propose rules to the board concerning the competent practice~~  
8 ~~of radiologist assistants and the administration of this article.~~

9 ~~(d) Recommend to the board the amounts of fees required under~~  
10 ~~this article.~~

11 ~~3817. After considering the committee's proposed rules, the~~  
12 ~~board shall adopt rules establishing standards for the following:~~

13 ~~(a) The competent practice of radiologist assistants.~~

14 ~~(b) The renewal of licenses issued under this article. *chapter.*~~

15 ~~(c) Standards for the administration of this article. *chapter.*~~

16 ~~3818. After considering the committee's recommendations for~~  
17 ~~fees, the board shall establish reasonable fees to be imposed to~~  
18 ~~administer the provisions of this act. *chapter.*~~

19 ~~3819. Each member of the committee shall receive a per diem~~  
20 ~~and expenses as provided in Section 103.~~

21 ~~-~~

### 22 ~~Article 3. Licensure~~

23 ~~-~~

24 ~~3821. An individual shall be licensed by the committee before~~  
25 ~~the individual engages in practice as a radiologist assistant. The~~  
26 ~~committee shall grant a license as a radiologist assistant to an~~  
27 ~~applicant who meets all of the following requirements:~~

28 ~~(a) Submits an application on forms approved by the committee.~~

29 ~~(b) Pays the fee established by the board.~~

30 ~~(c) Satisfies either of the following:~~

31 ~~(1) Successfully completed an approved educational program~~  
32 ~~for radiologist assistants and passed an examination approved by~~  
33 ~~the board.~~

34 ~~(2) Passed the radiology practitioner assistant examination~~  
35 ~~administered by the Certification Board for Radiology Practitioner~~  
36 ~~Assistants or another examination approved by the committee by~~  
37 ~~a successor or comparable entity, and maintains current registration~~  
38 ~~with the Certification Board for Radiology Practitioner Assistants~~  
39 ~~or a successor or comparable entity. The committee shall ensure~~

P8 1 the examination evaluates the knowledge and skills necessary to  
2 ensure the protection of the public.

3 (d) Possesses a state license in radiography.

4 (e) Submits to the committee any other information the  
5 committee considers necessary to evaluate the applicant's  
6 qualifications.

7 (f) Presents satisfactory evidence to the committee that the  
8 individual has not been engaged in an act that would constitute  
9 grounds for discipline or be the subject of a disciplinary action by  
10 a licensing or certification agency of another state or jurisdiction  
11 on the grounds that the individual was not able to practice as a  
12 radiologist assistant without endangering the public.

13 3822. The committee may refuse to issue a license to an  
14 individual if the individual has been disciplined by an  
15 administrative agency in another jurisdiction or has been convicted  
16 of a crime and the committee determines the act for which the  
17 individual was disciplined or convicted has a direct bearing on the  
18 individual's ability to practice competently as a radiologist  
19 assistant.

20 3823. (a) The committee may grant a temporary license to an  
21 applicant who meets the qualifications for licensure under this act,  
22 *chapter*, but is awaiting the next scheduled meeting of the  
23 committee for license approval.

24 (b) A temporary license is valid until the committee makes a  
25 final decision on the applicant's request for a license.

26 3824. (a) A license issued by the committee expires two years  
27 following the date of issue.

28 (b) An individual may renew a license by paying a renewal fee  
29 on or before the expiration date of the license.

30 (c) If an individual fails to pay a renewal fee on or before the  
31 expiration date of a license, the license becomes invalid and shall  
32 be returned to the committee.

33 3825. The committee shall reinstate an invalid license up to  
34 three years after the expiration date of the license if the individual  
35 holding the invalid license meets the requirements under this act.  
36 *chapter*.

37 3826. (a) An individual who is licensed under this act *chapter*  
38 shall notify the committee in writing when the individual retires  
39 from practice.

P9 1 ~~(b) Upon receipt of the notice, the committee shall record the~~  
2 ~~fact that the individual is retired and release the individual from~~  
3 ~~further payment of renewal fees.~~

4 ~~3827. If an individual surrenders a license to the committee,~~  
5 ~~the committee may reinstate the license upon written request by~~  
6 ~~the individual. The committee may impose conditions on the~~  
7 ~~license that the committee deems are appropriate to the~~  
8 ~~reinstatement. An individual may not surrender a license without~~  
9 ~~written approval by the committee if a disciplinary proceeding~~  
10 ~~under this article is pending against the individual.~~

11 ~~3828. (a) A radiologist assistant who notifies the committee~~  
12 ~~in writing may elect to place the radiologist assistant's license on~~  
13 ~~inactive status.~~

14 ~~(b) The renewal fee for an inactive license is one-half of the~~  
15 ~~renewal fee to maintain an active license.~~

16 ~~(c) If a radiologist assistant with an inactive license elects to~~  
17 ~~activate the license, the radiologist assistant shall pay the renewal~~  
18 ~~fee less any of the amount paid for the inactive license.~~

19 ~~(d) An individual who holds a license under this article and who~~  
20 ~~practices as a radiologist assistant while the individual's license~~  
21 ~~has lapsed or if the individual's license is on inactive status is~~  
22 ~~considered to be practicing without a license and is subject to~~  
23 ~~discipline.~~

24 ~~3829. Supervision by the supervising radiologist or the~~  
25 ~~radiologist designee shall be continuous and the supervising~~  
26 ~~radiologist or the radiologist designee shall be physically present~~  
27 ~~in the radiologist assistant's practice site to render direction or~~  
28 ~~assistance in the performance of a patient procedure. A supervising~~  
29 ~~radiologist shall determine the level of supervision of a radiologist~~  
30 ~~assistant performing a procedure based on a radiologist assistant's~~  
31 ~~technical ability, the procedure, the patient's history and clinical~~  
32 ~~presentation, and other relevant factors.~~

33 ~~3830. A radiologist shall not supervise more than two~~  
34 ~~radiologist assistants at the same time.~~

35 ~~3831. It is the obligation of each supervising radiologist to~~  
36 ~~ensure the following:~~

37 ~~(a) That the radiologist assistant's scope of practice is identified.~~

38 ~~(b) That delegation of medical tasks is appropriate to the~~  
39 ~~radiologist assistant's level of competence and within the~~  
40 ~~supervising radiologist's scope of practice.~~



P10 1 ~~(c) That the relationship of, and access to, the supervising~~  
2 ~~radiologist is defined.~~

3 ~~(d) That a process for evaluating the radiologist assistant's~~  
4 ~~performance is established and maintained.~~

5 ~~3832. (a) A supervising radiologist shall meet all of the~~  
6 ~~following requirements:~~

7 ~~(1) Be licensed as a physician and surgeon to practice medicine~~  
8 ~~in the state.~~

9 ~~(2) Register with the committee the radiologist's intent to~~  
10 ~~supervise a radiologist assistant.~~

11 ~~(3) Submit a statement to the committee that the radiologist~~  
12 ~~shall exercise supervision over the radiologist assistant in~~  
13 ~~accordance with rules adopted by the board and retain professional~~  
14 ~~and legal responsibility for the care rendered by the radiologist~~  
15 ~~assistant.~~

16 ~~(4) Not have a disciplinary action restriction that limits the~~  
17 ~~radiologist's ability to supervise a radiologist assistant.~~

18 ~~(5) (A) Maintain a written agreement with the radiologist~~  
19 ~~assistant that states the radiologist shall do both of the following:~~

20 ~~(i) Exercise supervision over the radiologist assistant in~~  
21 ~~accordance with any rules adopted by the board.~~

22 ~~(ii) Retain responsibility for the care rendered by the radiologist~~  
23 ~~assistant.~~

24 ~~(B) The agreement shall be signed by the supervising radiologist~~  
25 ~~and radiologist assistant, updated annually, and made available to~~  
26 ~~the committee upon request.~~

27 ~~(b) Except as provided in this section, this act *chapter* may not~~  
28 ~~be construed to limit the employment arrangement with a~~  
29 ~~supervising radiologist under this act. *chapter*.~~

30 ~~3833. (a) Before engaging in practice pursuant to this act,~~  
31 ~~*chapter*, the supervising radiologist and the radiologist assistant~~  
32 ~~shall submit, on forms approved by the board, the following~~  
33 ~~information:~~

34 ~~(1) The name, the business address, and the telephone number~~  
35 ~~of the supervising radiologist.~~

36 ~~(2) The name, the business address, and the telephone number~~  
37 ~~of the radiologist assistant.~~

38 ~~(3) A brief description of the setting in which the radiologist~~  
39 ~~assistant will practice.~~

40 ~~(4) Any other information required by the board.~~

P11 1 ~~(b) A radiologist assistant shall notify the committee of any~~  
2 ~~changes or additions in practice sites or supervising radiologists~~  
3 ~~not more than 30 days after the change or addition.~~

4 ~~3834. If a radiologist assistant is employed by a radiologist, a~~  
5 ~~group of radiologists, or another legal entity, the radiologist~~  
6 ~~assistant shall be supervised by, and be the legal responsibility of,~~  
7 ~~the supervising radiologist. The legal responsibility for the~~  
8 ~~radiologist assistant's patient care activities are that of the~~  
9 ~~supervising radiologist, including when the radiologist assistant~~  
10 ~~provides care and treatment for patients in health care facilities.~~  
11 ~~If a radiologist assistant is employed by a health care facility or~~  
12 ~~other entity, the legal responsibility for the radiologist assistant's~~  
13 ~~actions is that of the supervising radiologist. A radiologist assistant~~  
14 ~~employed by a health care facility or entity shall be supervised by~~  
15 ~~a licensed radiologist.~~

16 ~~3835. (a) This section applies to a radiologist assistant licensed~~  
17 ~~in this state, licensed or authorized to practice in any other state~~  
18 ~~or territory of the United States, or credentialed as a radiologist~~  
19 ~~assistant by a federal employer.~~

20 ~~(b) As used in this section, "emergency" means an event or a~~  
21 ~~condition that is an emergency, a disaster, or a public health~~  
22 ~~emergency.~~

23 ~~(c) A radiologist assistant who responds to a need for medical~~  
24 ~~care created by an emergency may render care that the radiologist~~  
25 ~~assistant is able to provide without the supervision required under~~  
26 ~~this act, *chapter*, but with such supervision as is available.~~

27 ~~(d) A radiologist who supervises a radiologist assistant providing~~  
28 ~~medical care in response to an emergency is not required to meet~~  
29 ~~the requirements under this act *chapter* for a supervising~~  
30 ~~radiologist.~~

31 -

#### 32 Article 4. Prohibitions and Offenses

33 -

34 ~~3840. An individual may not do any of the following unless~~  
35 ~~the individual is licensed as a radiologist assistant under this act.~~  
36 ~~*chapter*.~~

37 ~~(a) Profess to be a radiologist assistant.~~

38 ~~(b) Use the title "radiologist assistant."~~

~~(c) Use the initials "R.A." or any other words, letters, abbreviations, or insignia indicating or implying that the individual is a radiologist assistant licensed under this act. *chapter.*~~

~~3841. A radiologist assistant shall not interpret images, make diagnoses, or prescribe medications or therapies. A radiologist assistant may administer prescribed drugs as directed by the supervising radiologist or radiologist designee. A radiologist assistant may communicate and document initial clinical and imaging observations or procedure details only to the radiologist for the radiologist's use.~~

~~3842. A violation of this chapter is a misdemeanor. An individual who intentionally, or through gross negligence, violates this chapter shall also be subject to a civil penalty not to exceed five thousand dollars (\$5,000).~~

#### ~~Article 5. Revenue~~

~~3851. The Radiologist Assistant Fund is hereby created in the State Treasury. All fees, penalties, and fines authorized by this act *chapter* shall be deposited into the fund. All money in the fund shall, upon appropriation by the Legislature, be used by the board to carry out the purposes of this chapter.~~

~~3852. Fees to be paid by radiologist assistants for licensure and renewal of licensure shall be set by the board in an amount sufficient to cover the reasonable and necessary costs of implementing and administering this chapter.~~

#### ~~SEC. 2.~~

~~SEC. 3. No reimbursement is required by this act pursuant to Section 6 of Article XIII B of the California Constitution because the only costs that may be incurred by a local agency or school district will be incurred because this act creates a new crime or infraction, eliminates a crime or infraction, or changes the penalty for a crime or infraction, within the meaning of Section 17556 of the Government Code, or changes the definition of a crime within the meaning of Section 6 of Article XIII B of the California Constitution.~~