

STATE OF WISCONSIN  
RADIOGRAPHY EXAMINING BOARD

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| IN THE MATTER OF RULEMAKING | : | NOTICE OF TIME PERIOD    |
| PROCEEDINGS BEFORE THE      | : | FOR COMMENTS FOR THE     |
| RADIOGRAPHY EXAMINING       | : | ECONOMIC IMPACT ANALYSIS |
| BOARD                       | : |                          |

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NOTICE IS HEREBY GIVEN of the time period for public comment on the economic impact of this proposed rule of the Radiography Examining Board relating to scope of practice, including how this proposed rule may affect businesses, local government units, and individuals. The comments will be considered when the Department of Safety and Professional Services prepares the Economic Impact Analysis pursuant to § 227.137. Written comments may be submitted to:

Dale Kleven, Administrative Rules Coordinator  
Division of Policy Development  
Department of Safety and Professional Services  
PO Box 8366  
Madison, WI 53708-8366  
[DSPSAdminRules@wisconsin.gov](mailto:DSPSAdminRules@wisconsin.gov)

**The deadline for submitting economic impact comments is January 2, 2019.**

PROPOSED ORDER

An order of the Radiography Examining Board to repeal RAD 4.01 (2) (Note 1) and 4.02 (2) (o) and (Note 1); to amend RAD 1.02 (12) (intro.) and (h), 4.01 (2) (intro.), (c), (h), (i), (j), (k), (q), (r), (s), and (Note 2), and 4.02 (2) (intro.), (b), (k), (L), (m), and (Note 2); and to create RAD 1.02 (intro.) and (1m), relating to scope of practice.

Analysis prepared by the Department of Safety and Professional Services.

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ANALYSIS

**Statutes interpreted:**

None.

**Statutory authority:** Sections 15.08 (5) (b) and 227.11 (2) (a), Stats.

**Explanation of agency authority:**

Section 15.08 (5) (b), Stats., provides each examining board “[s]hall promulgate rules for its own guidance and for the guidance of the trade or profession to which it pertains. . .”

Section 227.11 (2) (a), Stats., sets forth the parameters of an agency's rule-making authority, providing "[e]ach agency may promulgate rules interpreting provisions of any statute enforced or administered by the agency. . .but a rule is not valid if the rule exceeds the bounds of correct interpretation."

**Related statute or rule:**

None.

**Plain language analysis:**

The scope of practice standards for radiographers and limited X-ray machine operators in current rules are a reproduction of the standards for scope of practice established by the American Society of Radiologic Technologists (ASRT) in 2016. ASRT periodically updates its standards, most recently in 2017. The proposed rules update the scope of practice standards in ss. RAD 4.01 and 4.02 to be a reproduction of the standards for scope of practice established by the ASRT in 2017.

The proposed rules also update the definitions in s. RAD 1.02 as follows:

- A definition of "As Low As Reasonably Achievable" or "ALARA" is created. The meaning given this term in s. RAD 1.02 (1m) is the same as in the 2017 ASRT standards for scope of practice (Glossary, Practice Standards for Medical Imaging and Radiation Therapy, 2017 American Society of Radiologic Technologists). The notes in ss. RAD 4.01 (2) and 4.02 (2) referencing the ASRT definition are repealed.
- A definition of "licensed practitioner" replaces a definition of "licensed independent practitioner" to reflect a change of terminology in ch. RAD 4 and the 2017 ASRT scope of practice standards.

**Summary of, and comparison with, existing or proposed federal regulation:**

None.

**Comparison with rules in adjacent states:**

**Illinois:**

32 Ill. Admin. Code 401, which provides for accreditation in the practice of medical radiation technology in Illinois, does not explicitly define scope of practice. However, scope of practice is addressed in definitions of the categories of accreditation in the practice of medical radiation technology and the techniques of applying radiation (32 Ill. Admin. Code 401.20). These definitions do not reference the standards established by the American Society of Radiologic Technologists.

**Iowa:**

641 IAC 42, which provides for permits to operate ionizing radiation producing machines or administer radioactive materials in Iowa, does not explicitly define scope of practice. However, scope of practice is addressed in definitions of the categories of permits to practice and the techniques of using ionizing radiation producing machines and

administering radioactive materials (641 IAC 42.2). In addition, the rules provide the scope within which a limited radiologic technologist with categories of chest, spine, extremities, shoulder, and pediatric shall perform radiography (641 IAC 42.9). The rules do not reference the standards established by the American Society of Radiologic Technologists.

**Michigan:**

The State of Michigan does not license operators of X-ray machines, nor does it have any requirements relative to the licensure or credentialing of X-ray machine operators except for radiologic technologists who perform mammographic examinations (Mich Admin Code, R 333.5630). These rules do not define or otherwise address scope of practice.

**Minnesota:**

Minn. Stat. 144.121, Subds. 5a. and 5b., provide the scope of practice of a limited X-ray machine operator (LXMO) and a means of granting a variance to a facility for the scope of practice of an LXMO. The statutes do not reference the standards established by the American Society of Radiologic Technologists.

**Summary of factual data and analytical methodologies:**

The proposed rules update the scope of practice of radiographers and limited X-ray machine operators to align with the current standards for scope of practice established by the American Society of Radiologic Technologists. No additional factual data or analytical methodologies were used to develop the proposed rules.

**Analysis and supporting documents used to determine effect on small business or in preparation of economic impact analysis:**

The proposed rules will be posted for a period of 14 days to solicit public comment on the economic impact of the proposed rule, including how this proposed rule may affect businesses, local government units, and individuals.

**Effect on small business:**

These proposed rules do not have an economic impact on small businesses, as defined in s. 227.114 (1), Stats. The Department’s Regulatory Review Coordinator may be contacted by email at NathanielL.Ristow@wisconsin.gov, or by calling (608) 266-3445.

**Agency contact person:**

Dale Kleven, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, P.O. Box 8366, Madison, Wisconsin 53708-8366; telephone 608-261-4472; email at DSPSAdminRules@wisconsin.gov.

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TEXT OF RULE

SECTION 1. RAD 1.02 (intro.) and (1m) are created to read:

**RAD 1.02 (intro.)** In this chapter and chs. RAD 2 to 6:

**(1m)** “As Low As Reasonably Achievable” or “ALARA” means making every reasonable effort to maintain exposures to radiation as far below the dose limits as practical, consistent with the purpose for which the licensed activity is undertaken, while taking into account the state of technology, the economics of improvements in relation to state of technology, the economics of improvements in relation to benefits to the public health and safety and other societal and socioeconomic considerations, and in relation to the use of nuclear energy and licensed materials in the public interest.

SECTION 2. RAD 1.02 (12) (intro.) and (h) are amended to read:

**RAD 1.02 (12) (intro.)** “Licensed ~~independent~~ practitioner” means any of the following:

**(h)** A health care provider who is defined as ~~an independent~~ a licensed practitioner.

SECTION 3. RAD 4.01 (2) (intro.), (c), (h), (i), (j), (k), (q), (r), and (s) are amended to read:

**RAD 4.01 (2) (intro.)** APPLICABLE STANDARDS. The scope of practice of a licensed radiographer includes all of the following, as defined in the Radiography Practice Standards, Practice Standards for Medical Imaging and Radiation Therapy, 2016 2017 American Society of Radiologic Technologists:

**(c)** Corroborating a patient's clinical history with procedure and ensuring information is documented and available for use by a licensed ~~independent~~ practitioner.

**(h)** Performing venipuncture as prescribed by a licensed ~~independent~~ practitioner.

**(i)** Starting, maintaining, and removing intravenous access as prescribed by a licensed ~~independent~~ practitioner.

**(j)** Identifying, preparing, and administering medications as prescribed by a licensed ~~independent~~ practitioner.

**(k)** Evaluating images for technical quality, and ensuring proper identification is recorded.

**(q)** Performing diagnostic radiographic and noninterpretive fluoroscopic procedures as prescribed by a licensed ~~independent~~ practitioner.

**(r)** ~~Determining~~ Optimizing technical exposure factors in accordance with the principles of ALARA, or As Low As Reasonably Achievable.

**(s)** Assisting a the licensed ~~independent~~ practitioner with fluoroscopic and specialized radiologic procedures.

SECTION 4. RAD 4.01 (2) (Note 1) is repealed.

SECTION 5. RAD 4.01 (2) (Note 2) is amended to read:

**Note:** ~~Copies of the~~ The Standard are on file at is available from the office of the Department of Safety and Professional Services and the Legislative Reference Bureau American Society of Radiologic Technologists' website at [www.asrt.org](http://www.asrt.org).

SECTION 6. RAD 4.02 (2) (intro.), (b), (k), (L), and (m) are amended to read:

**RAD 4.02 (2) (intro.)** APPLICABLE STANDARDS. The scope of practice of an LXMO includes all of the following, as defined in the Limited X-ray Machine Operator Practice Standards, ~~2016 Practice Standards for Medical Imaging and Radiation Therapy,~~ 2017 American Society of Radiologic Technologists:

(b) Corroborating a patient's clinical history with procedure and ensuring information is documented and available for use by a licensed ~~independent~~ practitioner.

(k) Performing diagnostic radiographic procedures limited to education or the prescribed by a licensed practitioner of a specific area of anatomical interest based on limited education, training, and licensure or certification as prescribed by a licensed independent practitioner within the LXMO's scope of practice.

(L) Assisting a licensed ~~independent~~ practitioner or radiographer during static radiographic procedures.

(m) ~~Determining~~ Optimizing technical exposure factors in accordance with the principles of ALARA, or As Low As Reasonably Achievable.

SECTION 7. RAD 4.02 (2) (o) and (Note 1) are repealed.

SECTION 8. RAD 4.01 (2) (Note 2) is amended to read:

**Note:** ~~Copies of the~~ The Standard are on file at is available from the office of the Department of Safety and Professional Services and the Legislative Reference Bureau American Society of Radiologic Technologists' website at [www.asrt.org](http://www.asrt.org).

SECTION 9. EFFECTIVE DATE. The rules adopted in this order shall take effect on the first day of the month following publication in the Wisconsin Administrative Register, pursuant to s. 227.22 (2) (intro.), Stats.

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(END OF TEXT OF RULE)  
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