



***CERTIFICATION BOARD
FOR
RADIOLOGY PRACTITIONER ASSISTANTS***

DOCUMENT ON THE

**SCOPE OF PRACTICE
FOR THE
RADIOLOGY PRACTITIONER ASSISTANT
or
RPA**

The following document defines the role and responsibilities of the Radiology Practitioner Assistant (RPA) in the contemporary practice of medical imaging and interventional practices. Recognized educational programs for the Radiology Practitioner Assistant encompass the cognitive, psychomotor and affective domains fundamental to the Scope of Practice defined herein.

Reference to the role of the RPA and the scope of practice is found in the American Society of Radiologic Technologists (ASRT), *Radiography; the Second Century* reports of the National Educational Conferences in the Radiologic Sciences held in March 1995, January 1996 and the final report dated November 1996.

DEFINITION OF A RADIOLOGY PRACTITIONER ASSISTANT

A Radiology Practitioner Assistant (RPA) is a health professional certified and registered as a radiographer and is credentialed to provide primary radiology health care services with physician supervision. Radiology Practitioner Assistants are qualified by graduation from an educational program recognized by the Board of Directors of the Certification Board for Radiology Practitioner Assistants (CBRPA). Within the physician/RPA relationship, Radiology Practitioner Assistants exercise autonomy in decision making in the role of a primary caregiver with regard to patient assessment, patient management and in providing a broad range of medical imaging and interventional services. The clinical role of the Radiology Practitioner Assistant includes primary and speciality care in radiology practice settings in rural and urban areas and is defined by the supervising physician.

- Adopted by the Board of Directors, CBRPA
 - Adopted by the National Society of Radiology Practitioner Assistants
 - Reference to the role definition is found in American Society of Radiologic Technologists (ASRT) reports of the National Consensus Conferences held in 1995 and 1996.
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INTRODUCTION

The structural elements of the Radiology Practitioner Assistant as a recognized health professional evolved as an extension of the radiologic technology profession within the contemporary health care delivery system in the United States and includes a:

- educational cognitive base within a graduate level curricula
- professional credential
- scope of practice
- code of ethics
- decision making in clinical practice
- self-governance in providing primary radiology health care

The developmental history of these structural elements can be traced in the evolution of medical imaging science with the role and responsibilities of the radiologic technologist becoming more complex due to technological innovations in medical imaging, sophistication of equipment and current medical practices within a managed health care system.

The educational program for the Radiology Practitioner Assistant consists of a curriculum that contains advanced pathophysiology, performing fluoroscopic procedures, image evaluation, problem patient management, determining clinical pathways, patient education and advocacy, patient care and assessment, radiobiology, professional communication, invasive vascular imaging, non-vascular invasive imaging, medical ethics and law and risk management. The content of the professional curriculum incorporates didactic and clinical elements and crosses horizontally through the medical imaging specialities. The structured learning experiences prepare graduates to function as a primary care giver, to infuse a commitment to patient care and to continue personal and professional development.

PROFESSIONAL CREDENTIAL

The initials *RT*, *RPA* or *RPA, RT* indicate a registered radiologic technologist who has been certified and registered in radiography and who has graduated from an educational program recognized by the Certification Board for Radiology Practitioner Assistants (CBRPA) and has been certified by the CBRPA and is currently registered as *active* with the CBRPA.

SCOPE OF PRACTICE for the RADIOLOGY PRACTITIONER ASSISTANT

The curriculum base for the Radiology Practitioner Assistant (RPA) is outlined in the American Society of Radiologic Technologists (ASRT) Final Report of the National Educational Consensus Conference in the Radiologic Sciences, November 1996. The educational standards of the Certification Board of Radiology Practitioner Assistants (CBRPA) build upon this curricular base, including patient care and assessment, advanced pathophysiology, performing fluoroscopic procedures (dynamic and static), image screening and evaluation, problem patient management, radiobiology, invasive vascular and non-vascular invasive procedures, determining clinical pathways in medical imaging, patient education and advocacy, medical ethics and law and risk management. The clinical practice of the RPA is assumed to be under the supervision of a physician who is qualified in the art and science of radiology/ medical imaging. The professional educational curriculum prepares graduates to, but is not limited to:

- provide a broad range of radiology health care services under the supervision of a licensed physician;
- assess and evaluate the physiologic and psychologic responsiveness of each patient;
- participate in patient management, including prescriptive powers for imaging procedures;
- administer intravenous medications or contrast media, under the supervision of a licensed physician and record documentation in medical records;
- perform fluoroscopic procedures, both dynamic and static;
- perform specialized imaging procedures, including invasive procedures, after demonstrating competency and under the supervision of a licensed physician;
- evaluate and screen medical images for normal vs. abnormal and provide a technical report to the supervising licensed physician;
- maintain values congruent with the Code of Ethics, as well as adhering to national, institutional and/or departmental standards, policies and procedures regarding the standards of care for patients.

CBRPA strongly believes that the supervision of RPAs should be provided by licensed physicians who are board-certified (ABR) radiologists or have comparable qualifications.

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References: ASRT National Educational Consensus reports of 1995 and 1996.

IMPORTANT DEFINITIONS

Practice as a Radiology Practitioner Assistant -- the practice of radiology health care services performed under the supervision of a licensed physician. Practice as a Radiology Practitioner Assistant is a health profession considered to be advanced level of practice of radiologic technology.

Practice of Medicine -- the diagnosis, treatment, prevention, cure or relieving of human disease, ailment, defect, complaint or other physical and mental conditions, by attendance, advice, devise. diagnostic test or other means, or offering, undertaking or attempting to do, or holding oneself out as able to do, any of these acts.

Supervision -- means the overseeing or participation in the work of another individual by a licensed physician, as defined in the Commission on Medicare and Medicaid Services (CMS) federal regulations:

- a. **General Supervision:** Procedures are furnished under the physician's overall direction and control, but physician presence is not required. A licensed physician must be available on a regularly scheduled basis to review the practice of the supervised individual, to provide consultation to the supervised individual, to review records, and to further educate the supervised individual in the performance of the individual's performance;
- b. **Direct Supervision:** To be applied to types of services other than diagnostic x-rays. Direct supervision does not mean that the physician must be present in the room when the procedure is performed; however the physician must be immediately available to furnish assistance and direction throughout the performance of the procedure. Continuous availability may be direct communication in person, by radio, telephone, fax, e-mail, teleradiology or other telecommunications methods between the supervised individual and a licensed physician;
- c. **Personal Supervision:** A physician must be in attendance in the room during the performance of the procedure. Examples of the procedure requiring personal supervision are cardiac catheterization and cardiovascular stress tests, including those furnished in nuclear medicine and echocardiography procedures.
- d. The provision by the licensed physician to the supervised individual of predetermined procedures and protocol.

Scope of Practice -- a document describing the privileges, responsibilities, rights and parameters of practice within specific disciplines for individuals who meet the educational and credentialing requirements.

Adopted by the National Society of Radiology Practitioner Assistants.

CODE OF ETHICS
of the
RADIOLOGY PRACTITIONER ASSISTANT

The Certification Board for Radiology Practitioner Assistants recognizes its responsibility to aid the profession in maintaining high standards in the provision of quality and accessible radiology health care services. The following principles delineate the standards governing the conduct of Radiology Practitioner Assistants in their professional interactions with patients, colleagues, other health professionals and the public.

- As an extension at an advanced level within the radiologic technology profession, the Radiology Practitioner Assistant will adhere to the established professional Code of Ethics and principles.

In addition to the established professional Code of Ethics and principles, the conduct of the Radiology Practitioner Assistant will be further governed by the following ethical and professional principles.

- **Radiology Practitioner Assistants** shall adhere to all state and federal laws governing informed consent concerning the patient's health care.
- **Radiology Practitioner Assistants** shall seek consultation with the supervising physician, other health providers, or qualified professionals having special skills, knowledge or expertise whenever the welfare of the patient will be safeguarded or advanced by such consultation. Supervision should include ongoing communication between the supervising physician and the RPA regarding care of all patients.
- **Radiology Practitioner Assistants** shall provide only those services for which they are qualified via education and demonstration of clinical competency.
- **Radiology Practitioner Assistants** shall not misrepresent in any manner, either directly or indirectly, their clinical skills, educational experience, professional credentials, identity, or ability and capability to provide radiology health care services.
- **Radiology Practitioner Assistants** shall place service before material gain and must carefully guard against conflicts of professional interest.

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