

Delegates Thomas Hutchinson, Joseline A. Pena-Melnyk, Bonnie Cullison, Tiffany T. Alston, Heather Bagnall, Harry Bhandari, Brian Chisholm, Pam Lanman Guzzone, Terri L. Hill, Steve Johnson, Anne R. Kaiser, Kenneth Kerr, Nicholas R. Kipke, Robbyn Lewis, Lesley J. Lopez, Ashanti Martinez, Matthew Morgan, Teresa E. Reilly, Samuel I. Rosenberg, Kathy Szeliga, Deni Taveras, Jennifer White Holland, and Jamila J. Woods

House Office Buildings
Annapolis, Maryland 21401

Re: Opposition to HB0934 - Radiation Therapy, Radiography, Nuclear Medicine Technology, and Radiology Assistance - Limited Licensed Radiologic Technologist

Dear Delegates on the Health and Government Operations Committee,

I am writing to strongly oppose HB0934, currently under consideration in the Maryland General Assembly. As a concerned citizen and resident of Maryland, I am deeply concerned about the Limited licensure of the Radiologic Technologist profession in Maryland. The introduction of the Limited Licensed Radiologic Technologist profession in Maryland raises serious concerns about not only the safety of patients, but the integrity of this profession and education, as well as how current technologists will be affected by this. To elaborate, I would like to elaborate on why this bill should not be advanced:

1. Limited training and qualifications and patient safety: Current students in Radiology technology go through intensive education to fully understand how imaging works, proper positioning and understanding of how each patient is different, as well as how to safely administer radiation to patients safely. However, Limited Licensed Radiologic Technologists undergo significantly shorter training periods compared to licensed Radiographers. While some employers may think this is a good thing regarding the decreased wage and faster education, it concerns me that their ability to safely radiate patients will not be proper. Due to an increase in radiation-based medical procedures, especially in the youth, we must prioritize the expertise and proficiency of healthcare professionals in delivering treatments that require ionizing radiation. The proposed bill does not require accreditation of training programs, nor does it require continuing education. I do not believe it is safe for a person to have such a limited education and hold so much power over how much damage they can do to a patient unknowingly. Also, any fully licensed radiographer who has obtained their license starting in 2011 are required to take a Continuing Qualifications Requirements exam like the initial board exam every 10 years to ensure that their knowledge remains current. I cannot fully understand why it would be a good idea to make some technologists require this important step in ensuring the safety of patients and knowledge of technologists, while some do not.
2. Patient safety concerns: Ensuring the highest standards of patient care and safety should be more important than any legislative endeavor. The proposed bill states,

“Practice limited license radiologic technology means to perform radiographic procedure employing equipment that emits ionizing radiation that is limited to specific areas of the human body.” While you may think this sounds simple and more efficient to get more employees, all x-ray machines are the same and can deliver harmful amounts of radiation to patients. With limited training on x-rays and other radiologic machines, this poses a great threat to the public. 15 clock hours of radiation protection education is not sufficient to protect patients. Most radiography program students receive over 75 hours (about 3 days) of radiation protection education. In addition, digital radiography already delivers a greater dose to patients. A well-educated radiographer is crucial in selecting the proper dose to patients as well as producing proper imaging, limiting the number of repeat exposures, ultimately lowering patient dose. SB0935 does not provide for competency-based clinical learning of procedures, meaning there is no evaluation or verification that these individuals can competently perform exams. Limited licensed students will result in poor image quality leading to a decrease in diagnoses' accuracy and an increase in needed repeat radiographs resulting, in increased patient dose.

3. Potential long-term impacts and shortages: If this bill is passed, I not only fear, but I know that there will be a reduction in the number of available jobs for fully licensed radiographers if medical facilities hire those with limited licenses. In addition, many radiographers may even lose their jobs that they have had for years due to the amount limited radiographers get paid compared to fully licensed radiographers. In addition, this bill will also potentially decrease the number of students enrolling in our Radiologic Technology programs across the state, jeopardizing the viability of these programs. Not only will you have a decreased value in valued and efficient students, but there will also be a greater decrease in adequate technologists in the future everywhere, especially in hospitals which are already greatly under staffed. This will even result in a reduction of technologists qualified to get licensed in modalities such as mammography and computed tomography, resulting in a decrease in access to these services. Again, pertaining to patient safety and accessibility. Maryland already has robust educational programs and mechanisms in place to address shortages in radiologic technologists. I understand that many may want this bill to pass due to limited licensed techs will be cheaper to employ, but this is not worth the risks of patient safety, the shortage of employees in hospitals, and the decreased respect of the field.

I respectfully urge you to reconsider the implications of HB0934 and to withdraw support for this legislation.

Thank you for considering my concerns regarding HB0934. I hope you will act in the best interests of our community and provide patients with the care they deserve.

Sincerely,

Alexis Bopp