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

To whom it may concern,

I am writing to strongly oppose HB0934 currently under consideration in the MD General Assembly. As a radiologic technologist who is currently working in the field, I believe that this proposed legislation presents risks and challenges that demand immediate attention. I would like to highlight several reasons why this bill should not be advanced.

1. The future of radiology will be at risk. Currently there is a shortage of technologists in the State of Maryland. Passing this bill will not help those numbers to increase long term. If young adults can get a limited radiology license directly after highschool, why would anyone actually enter a radiology program in the future? If the entering numbers remain low it could in turn cause the radiology program to close. Which would harm not only XR but other modalities as well. Without a full radiology license, a technologist can not go into any other modality, such as MRI, CT, PET Scan, Mammography etc.. If Maryland is flooded with limited techs, then in the future there will be a shortage of fully licensed techs working in those special modalities. Which will cause more harm to the citizens of MD, as a lot of cancers and other pathologies are detected with these additional imaging modalities.
2. Technologist leaving the field: If many outpatient facilities are flooded with limited radiology technologists, and fully licensed technologists are forced to move into hospital settings due to lack of hours or pay cuts, what would stop fully licensed techs from leaving the field completely, if they do not want to work in a hospital setting, or go into another modality. There are many technologists who have only worked in outpatient XR their whole careers. To say that they would be required to go work in a hospital due to staffing issues, could result in them leaving the field completely, causing more shortage.
3. Training and supervision: If facilities are currently experiencing high turnover rates of not only radiology techs, but also medical assistants, how will this proposed bill keep the turn over from happening. Could it be that there might be other issues such as working conditions, shifts, job descriptions/responsibilities outside of the scope of practice, lack of pay, as well as other external factors that are keeping licensed techs from applying to these facilities? If medical assistants/limited technologists continue to constantly change, how can anyone learn the hands-on training that is needed to perform this job safely. These limited technologists also need to be supervised. Who will be supervising them? Will it be someone who has not worked on the clinical side for 10-15 years or

someone who themselves are not qualified to take XRs? How will this ensure the safety of the citizens of Maryland when it comes to being exposed to radiation from someone with a limited amount of training?

4. Wait times and amount of XRs: Many hospitals in MD currently have high wait times. This bill will not change that. Most radiology technologists in hospitals or outpatient facilities spend half their shift locating and transporting their patients, triaging their patients, advocating for their patients by running around finding nurses or doctors to correct wrongly ordered exams, and completing paperwork. They also are performing way more XRs than needed, as many doctors, PAs, and nurses over order. All of this takes time, which causes a need for more techs due to a hold on actually performing the exams. Instead of allowing barely trained individuals to take limited XR and potentially causing harm to patients from indecent use of active radiation, number of repeats, and quality of images, all from lack of proper schooling and training, why are these facilities not hiring tech aids? People that can do all the busy work as well as learn about the field. I believe this would in turn also get employees interested in going to school and getting a Full license in radiology.
5. Quality over Quantity: Fully licensed radiology technologists spend two years of pre-reqs, which include multiple college level anatomy, science and math classes as well as 2 years of the radiology program in a classroom learning extremely detailed anatomy, positioning, science, math, and pathology as well as actively learning hands on in clinical settings and labs. This ensures that upon graduation, the quality of their exams are immaculate and the knowledge they possess to safely perform exams on severely broken bones, extremely sick patients, and even very young patients are top notch. This quality of work just can not be learned in a limited training course, by someone as young as 18 years old and fresh out of high school. Medical assistant jobs are a wonderful way to introduce young minds to the healthcare setting, but were not intended to be built upon without further detailed schooling. As a MD citizen, I would not want someone with only a limited amount of schooling and "training" performing a diagnostic exam on myself or any family member.

These are just some of the reasons I believe this bill will not be beneficial for Maryland, as someone who currently works in the field. I respectfully urge you to reconsider the implications of HB0934 and to withdraw support for this legislation. Instead, I encourage a collaborative approach that prioritizes the safety and well-being of Maryland residents while addressing workforce shortages through proven, sustainable methods.

Thank you for considering my concerns regarding HB0934. I trust that you will act in the best interests of our community and uphold the standards of excellence in healthcare delivery that Maryland residents deserve.

Sincerely,
Kimberly Bowen RT(R)