

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Janice Dupont
7978 Alchemy Way
Elkridge, MD 21075

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Advanced Radiology] for the past [20] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Janice Dupont

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Julia Vonella
438 Madingley Rd, Linthicum
Heights, MD 210990

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Crossroads imaging center] for the past [2] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Julia

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Mona Fuller
5508 Prince William CT,
Frederick MD, 21703

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Advanced Radiology] for the past [17] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Mona Fuller R.T. RM

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

David Bellistri
3401 Cayman Way
Abingcon, Md. 21009

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Whitesquare Imaging Center for the past 35 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

David Bellistri RT(R)(MR)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Hadir Samimi
21302 Emerald Drive
Germantown, MD 20876

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radiology Associates for the past ten years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Hadir Samimi

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Andrea Austin
11409 Duryea Drive
Potomac, MD 20854

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radiology Associates for the past 16 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Andrea Austin

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Deborah Kearney
3 Sandstone Court
Baltimore, MD 21236

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Advanced Radiology] for the past [42] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Deborah Kearney RTM

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Debra Burroughs RTR R CT R
6915 Rose lane
Laplata Md 20646

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Community Radiology] for the past 4 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Debra G Burroughs RTR CTR

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

RENEE ROSS
114 CHELL RD
JOPPA MD 21085

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at ADVANCED RADIOLOGY for the past 23 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

RENEE ROSS

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Michelle L Brumley
2 Lothian Way
Lothian, Md 20711

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) for the past 32 years, employed with Community Radiology for the past 2 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Michelle L Brumley

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Kristen Hauptmann
2515 Tally Ho Drive
Fallston, MD 21047

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Advanced Radiology] for the past [25] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Kristen Hauptmann RTM

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Jayser Gamboa, RT(R)
7545 Coach Place,
La Plata, MD 20646

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Clinton Community Radiology Associates for the past 11 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,



Jayser Gamboa, RT(R)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Alisa Stephens
7923 Underhill Road
Baltimore, MD 21237

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 6 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Alisa Stephens R.T.(R)(MR)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Prudence A. Cromartie
7407 Perrywood Rd
Upper Marlboro, MD 20772

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

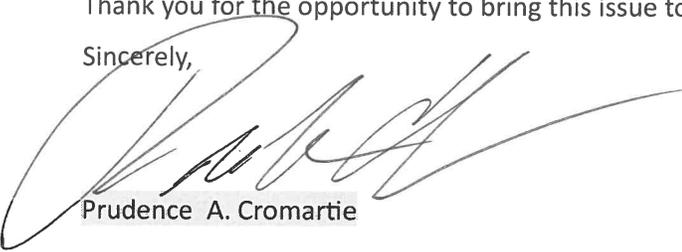
I have been a Radiologic Technologist (RT) at Community Radiology for the past 17 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,



Prudence A. Cromartie

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Jennifer Bayne
117 Simmons Ridge Rd.
Prince Frederick, MD 20678

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at American Radiology at Calvert for the past 25 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Jennifer Bayne

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Carolyn Riffe
1712 Market Street
Owings, MD 20736

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at American Radiology at Calvert for the past 19 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Carolyn Riffe

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Debra L Miller Joiner
8148 Grayden Lane
Brandywine Md.20613

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Clinton Imaging] for the past [40] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Debra L Miller Joiner

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Brenda Newman
8203 pleasant Valley Road
Stewartstown, Pa 17363

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Timonium Crossing for the past 22 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Brenda Newman

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Shannon Skene
Pasadena, MD

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Advanced Radiology] for the past [15] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Shannon Skene

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Linda Ortmann R.T. (R,M,CT)
11602 Sun Circle Way
Columbia, MD 21044

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) for 40 years, I have worked at Advanced Radiology for the past four years. To become a radiologic technologist, I had to successfully complete a two year accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of experienced Radiology Technologists. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Linda Ortmann, R.T. (R)(M)(CT)

February 21, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Jennifer L. Mister RT (R)(M)
104 Parkway Avenue
Havre de Grace, MD 21078

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 14 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

A handwritten signature in black ink, appearing to read "Jennifer L. Mister". The signature is fluid and cursive, with a large initial "J" and "M".

Jennifer L. Mister RT (R)(M)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Mary Boeshore
8649 Heathermill rd
Baltimore, MD 21236

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Advanced Radiology] for the past [37] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Mary Boeshore RTM

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Tyler Joseph Dillon
210 Timber Trail APT C, Bel
Air, MD 21014

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past year and for 5 years at Charleston Area Medical Center Memorial Hospital in West Virginia. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Tyler J. Dillon

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Kristina Kelm
521 Sunset Knoll Rd,
Pasadena MD 21122

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Kristina Kelm] for the past [14] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Kristina Kelm R.T. (R)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Leah M. Engle
116 Mountain Rd. Unit 3C
Glen Burnie, MD 21060

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Radnet for the past 3 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Leah M. Engle RT

PS.

If you think this is a good idea (having 2 weeks training to do this job) I would love to invite you to shadow a clinical session with a student that is 2 weeks into this program. It will clearly demonstrate how absolutely insane this suggestion is.

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Jody A. Donohue
7527 Chesapeake Avenue
Baltimore, MD 21219

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 25 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Jody A. Donohue

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Jacob Durst
4313 Falls Rd
Baltimore, MD 21211

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology located at GBMC for the past 16 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Jacob Durst

February 21, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Sherella Butler
4722 Duncannon Rd.
Pikesville, MD. 21208

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 3 years as well as Laurel Medical Center for 11 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Sherella Butler

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Aleksandr Kovalerchik
2308 Cavesdale Rd.
Owings Mills, MD 21117

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 14 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Aleksandr Kovalerchik

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Shannon Snell
8354 Montgomery Run Rd. #
G
Ellicott City, MD 21043

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 14 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Shannon Snell

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Joseph Gerbes
813 Myrth Ave
Baltimore MD 21221

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 25 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Joseph Gerbes

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Your Name: Diane Durm
Your Address: 2503 Houcks
Mill Rd. Monkton, MD
21111

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist RT (R)(CV)(M)) at Advanced Radiology for the past 3 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Diane Durm

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Stefanie M. Esbrandt
2514 Burr ridge Rd
Baltimore , MD 21234

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past six years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Stefanie M. Esbrandt

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Dawn Schafer
614 Kilmarnock Trail
Bel Air, MD 21014

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 15 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Dawn L. Schafer

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Tina Flynn
3401 Keats Terrace
Ijamsville, MD 21754

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at hospitals and outpatient centers in New York and Maryland for the past 28 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Tina L. Flynn

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Sarah Cote
10506 Old Court Rd
Woodstock, MD 21163

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at the Owings Mills Advanced Radiology Center for the past 8 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Sarah Cote

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Katherine Lynch
3835 Ocean Sunfish Ct
Waldorf, MD 20603

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at American Radiology for the past 8 months. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Katherine Lynch

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Gwen Sexton
3810 Conowingo Rd
Darlington MD, 21034

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 25 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Gwen Sexton RT(R) CT(R)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Brian Bell R.T. (R)
7680 Cedar Dr.
Pasadena, MD

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology-Aiello Center for the past 5.5 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Brian Bell R.T. (R)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Renne Rehmar
1071 Montessori Dr
Westminster Md 21158

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Pomona for the past 15 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Renne Rehmar R.T. (R)(MR)(CT)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Lisa Fritz RT R MR
4028 Geeting Rd.
Westminster, MD 21158

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 33 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,



Lisa Fritz RT R MR

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Michaela Thess
8203 Berryfield Drive

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past nine years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Michaela Thess

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Nicole Fuoco
15955 Frederick Rd #2548
Rockville, Md 20855

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radiology Associates, Rockville Pike for the past 1.5 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Nicole Fuoco RT(R)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Adamari Sanchez
11215 Georgia Ave Apt 837,
Silver Spring , MD, 20902

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radology Assocaites for the past 2-3 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Adamari Sanchez

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

BARBARA HILBERT
1424 FAIRBANKS DRIVE
HANOVER MD 21076

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advance Radiology Glen burnie for the past 27 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Barbara Hilbert RT R, CT

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Your Name Karen Smith
Your Address 20822 Emerald
Drive Hagerstown, MD 21742

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Community Radiology Associates] for the past [14] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Karen Smith

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Debra A.Y. Outten
213 N. Stokes Street
Havre de Grace, MD 21078

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

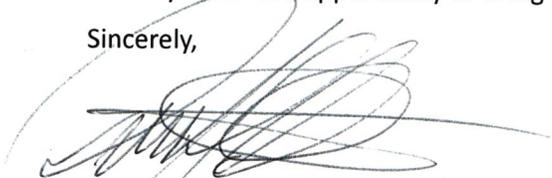
I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 30 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,



Debra. A.Y. Outten, R.T.R.M.Q.M.

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Kalah Houston
31 Highlands Ct
Owings Mills, MD 21117

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Owings Mills Advanced Radiology for the past 3 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Kalah Houston

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Constance Mascelli
1002 Longstream Court
Bel Air MD 21014

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I am Radiologic Technologist (RT) at Advanced Radiology (Harford 104) and have been a Registered Technologist for 33 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting

more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Constance Mascelli RT(R)(CT)(ARRT)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Brittany Brockmeyer
16 Juxon Ct
Baltimore, MD 21236

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Rad Net for the past 6 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Brittany Brockmeyer RT(R)(M)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Noel Tomlinson
10107 Tipperary Rd.
Parkville, MD 21234

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Radnet for the past 23 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Noel Tomlinson, RT(R)(M)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Terri Kerth
4445 Hope Acres Drive
White Plains, MD 20695

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at American Radiology Pembroke for the past 24 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Terri Kerth RT(R)(ARRT)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Damien R. Dickerson, B.S., R.T (R)
4317 Hampshire Rd
Hampstead, MD 21074

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Owings Mills Radnet Imaging center for the past 1.5 years and in the Medical Imaging field for 18 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Mr. Damien Robert Dickerson, B.S., R.T. (R)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Kathleen Franklin
R.T.(R)(MR)(CT)A.R.R.T.
7500 Cameron Ridge Road,
Hughesville, MD 20637

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at American Radiology @ Pembroke for the past 40 plus years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Kathleen Franklin R.T.(R)(MR)(CT) A.R.R.T.

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance
Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Jackie Edwards
2523 Karen Way Westminster,
MD. 21157

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) for over 30 years and currently work at Advanced Radiology. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 it would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist. Each patient will be at risk of excessive radiation due to repeats.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures which is more radiation to the patient and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Jackie Edwards

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Jihye Kim
7423 Slipknot Aly, Elkridge,
MD 21075

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 7 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Jihye Kim

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Laura Robinson
8203 Buchanan Dr.
Walkersville, MD 21793

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Community Radiology] for the past [2] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Laura Robinson RTRM

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Stacey Haga
6620 Gilardi Road
Boonsboro, MD 21713

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radiology Associates, Crestwood office, for the past 14 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Stacey Haga RT(R)(M)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991 Nicole Heffner
PO Box 13 Maugansville MD 21767

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radiology Associates Crestwood for the past 17 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months. In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,
Nicole Heffner RT (R)(M)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Nadia Routson
811 Stallion Drive

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 6 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Nadia Routson

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Eliza Mullikin
7316 Waldman Ave.
Sparrows point Maryland
21219

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 4 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Eliza Mullikin

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Cara Moore-Broadus
25 Tulsa Lane
Hagerstown, MD 21740
240-382-4428

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Community Radiology Associates] for the past 17 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Cara Moore-Broadus

Handwritten signature of Cara Moore-Broadus in black ink, appearing to read "BS, RT (K) (u)".

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Samantha Ivan
218 Crestview Dr. Thurmont,
MD 21788

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radiology Associates Rose Hill for the past 2.5 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Samantha Ivan

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Carole A. Bankard
3707 Perry Hall Road
Perry Hall, Maryland 21128

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 47 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,



Carole A. Bankard

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Karen L. Kraynak
9530 Childacrest Dr.
Boonsboro, MD 21713

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Frederick Health /Community Radiology(Rosehill)] for the past [31] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Karen L. Kraynak

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Amy Rinebolt
5514 Ferrero Lane
Keedysville, MD 21756

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radiology Associates- Rose Hill location for the past 13 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Amy Rinebolt

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Karen Soellner RT(R)(MR)
2813 Ross Avenue
Sparrows Point, MD 21219

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 39 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Karen Soellner RT(R)(MR)

443-585-5195

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Alisa Downing
18616 Queen Elizabeth Drive
Brookeville MD 20833

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [RADNET Community Radiology Associates for the past five years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Alisa Downing

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Christine Hollar
5309 Concord Ct.
Mt. Airy, MD 21771

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radiology Assoc. for the past 28 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Christine Hollar R.T. (R)(M)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Shannon Donovan
622 S Broadway Apt 107
Baltimore MD 21231

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) for the past 4 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Shannon Donovan

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Samantha Tyler
53 Shrewsbury Ct.
Perry Hall MD, 21128

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Advanced Radiology] for the past [4] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Samantha Tyler

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Kelly Forshey
5 Sonora Drive
Pasadena, MD 21122

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 16 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Kelly Forshey RT(R) (M) (CT)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Pamela Schneider
613 Kahn Drive
Baltimore, Maryland 21208

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology, Pomona Square] for the past [51] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Pamela Schneider, R.T.

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Rebecca Winters
20240 Waters Row Terrace
Germantown, MD 20874

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radiology Associates for the past four years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Rebecca Winters

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Patricia L. Horney, RT(M)(QC)
ARRT, AA
317 Locust Avenue
Essex, MD 21221

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Advanced Radiology] for the past [27] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Patricia L. Horney, RT

February 23, 2024

Ashley Keedy
224 Weldon Circle
Boonsboro, MD 21713

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radiology Associates for the past 6 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Ashley Keedy

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Joyce Rose
7812 Falling Leaves Ct
Ellicott City, MD 21043

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Advanced Radiology, Howard County] for the past [32] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Joyce Rose

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Karen L Giesey
47 Logan Drive
New Freedom, PA 17349

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 35 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Karen L Giesey R.T.R(M)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Lori Ann Baldoni
1892 Lakeland Dr
Finksburg Md 21048

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) with Advanced Radiology/ RADNET for the past 19 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Lori Ann Baldoni R.T. (R)(MR)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Christine Barsda
1 Ewing Drive
Reisterstown, MD 21136

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology, Northwest Hospital and Sinai Hospital for the past 14 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Christine Barsda

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

krystle Haskins
2300 Weathervane road

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Hunt Valley] for the past [5] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Krystle Haskins R. T. (R)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Chantel Jackson
809 Bradley Road
Joppa, MD 21085

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at multiple Advanced Radiology offices for the past 15 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Chantel Jackson

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Melissa Clites
9750 Smith Way Dunkirk, MD
20754

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Patuxent Imaging/ARS] for the past [22] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Melissa Clites

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Antonio M. Papel, RT, MR, ARRT
1339 Atwood Rd
Silver Spring, MD 20906

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Radnet for the past 4 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Antonio M. Papel

--

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Your Name GIRMA
MENGESHA
Your Address 834
UNIVERSITY BLVD. WEST
SILVER SPRING MD

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [RAD NETS] for the past [4] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Your Name

GIRMA MENGESHA

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Staci Crawford
55 Sparrows Way
Elkton, MD 21921

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past [9] months. I have been a technologist since 1996. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Staci Crawford

Staci Crawford RT(R)(CT)
Advanced Radiology Harford

February 20, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Janine Royer
6188 S Steamboat Way
New Market, MD 21774

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radiology for the past 2 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Janine Royer

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Jewell C. Liotino
213 Garner Ave
Waldorf, MD 20602

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at American Radiology Pembroke for the past 2 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Jewell C. Liotino

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Lisa Findley
4110 Carrick Ct
Emmitsburg, MD 21727

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 5 years as well as several other locations over the past 30 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Lisa Findley RT(R)(M)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Cherie Casey
Westminster MD

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced radiology and other facilities for the past 15 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Cherie Casey R.T.R (M)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Karen Sponaugle
107 Amanda Ln
Centreville MD 21617

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology- Annapolis for the past 28 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Karen Sponaugle RT (R)(M)(CT)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Kristin Rodgers
5564 Gayland Road
Baltimore, MD 21227

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 17 years. That doesn't include the 5 years that I worked at another location. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Kristin Rodgers RT R CT

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Kristin Kearney
4216 Roop Road
Mt. Airy, MD

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology – Fisher for the past 6 years and Johns Hopkins Howard County Hospital Center for 16 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Kristin Kearney RT(R)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Cara Pedrick
6 Monmouth Road
Catonsville, MD 21228

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 10 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Cara Pedrick

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Meredith Chamberlin
420 Regester Ave
Baltimore MD 21212

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 3 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Meredith Chamberlin

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Kelly A. Kunze, R.T.(R)(CT)
101 Theodora Court
Forest Hill, MD 21050

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology/RadNet for the past 37 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Kelly A Kunze R.T.(R)(CT)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Stacy Ingalls
1253 Collier Lane
Belcamp, MD 21017

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology for the past 7 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Stacy Ingalls

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Nadja Fermin
4013 Windermere Way
Mount Airy, MD 21771

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advance Radiology for the past 10 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Nadja Fermin

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Jessica Long
10193 Spruce Way
Ellicott City MD 21042

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Advanced Radiology, Crossroads for the past 5 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Jessica Long

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Gina Lester
17940 Lyles Drive
Hagerstown, MD 21740

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at CRA Crestwood for the past 20 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Gina Lester RT (R) ARRT

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Deborah Kaiser
7570 Merrymaker Way
Elkridge, Maryland 21075

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I am currently enrolled as a full-time student to become a Radiologic Technologist. To become a RT, I will have to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements will consist of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This will be followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I will then have to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I will need to obtain a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months. I take my education very seriously and believe that this profession calls for this level of education. I am not looking to cut corners to become a Radiologic Technologist any sooner.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Deborah Kaiser

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Cheryl L Sullivan
2301 Ellen Ave
Parkville, MD 21234

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at several Maryland healthcare facilities for the past 38 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Cheryl L Sullivan

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Susan Alexander
61 George St Taneytown, MD

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at RadNet for the past 38 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Susan E Alexander

February 23, 2024

Margaret Farkas
160 Pinehurst Lane
Easton, Pa 18042

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at RadNet for the past 15 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Margaret A Farkas

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

April M. Reed
1554 Buckhorn rd
Sykesville, MD 21784

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radiology Associates for the past 10 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

April M. Reed



April M. Reed
R.T. (CR)(M)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Charmaine Blanchard
10103 Baltimore Avenue Apt
2306
College Park MD 20740

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Community Radiology Associates Leisure World] for the past [20] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Charmaine Blanchard

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Mary Anderson
6722 Pyramid Way
Columbia, MD 21044

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at RadNet for the past 11 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Mary Anderson R.T. (R)(M)(ARRT)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Leandra Caughy
5809 Hawk Ridge Rd
Frederick, MD 21704

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radiology Rose Hill for the past 4 months and a technologist for 10 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Leandra Caughy

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Mary Somosky
4035 Todd Drive
Prince Frederick, MD 20678

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at [Community Radiology Associates Bowie-South] for the past [24] years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

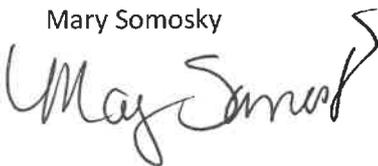
In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Mary Somosky

A handwritten signature in black ink that reads "Mary Somosky". The signature is written in a cursive style with a large, sweeping flourish at the end.

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Katelyn Weaver
1000 Prentiss Point Parkway
Martinsburg, WV 25401

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) for 4 years and have been at Community Radiology Associates for the past 2 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Katelyn Weaver

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Gregory Swartz
11780 Green Valley Road
Union Bridge, Maryland
21791

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) for 7 years and have been at Community Radiology Associates for the past 2 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Gregory Swartz

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Alyssa Bloom
12355 Shelby Ave
Waynesboro, PA 17268

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) for 10 years and have been at Community Radiology Associates for the past 7 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Alyssa Bloom

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Terri Goodwin, R.T. (R)(M)
6 Valley Park Court
Damascus, MD 20972

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Community Radiology Associates for the past 17 years. In total, I have been a Registered Technologist for 28 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Terri Goodwin, R.T (R)(M)

February 23, 2024

The Honorable Senator Pamela Beidle, Chair
The Honorable Katherine Klausmeier, Vice Chair
Senate Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St., Annapolis, MD 21401-1991

Karen Trevathan
6120 Kerrick DR
La Plata, MD 20646

Dear Chair Beidle, Vice Chair Klausmeier and Members of the Senate Finance Committee:

I have serious concerns regarding Senate Bill (SB 830) which would permit individuals with limited training, experience, and supervision to perform select x-ray examinations without a license. If passed, SB 830 would go into effect on October 1, 2024.

I have been a Radiologic Technologist (RT) at Clinton imaging Center for the past 23 years. To become a RT, I had to successfully complete an 18 to 25-month accredited Radiology program full-time. My educational requirements consisted of 600 to 700 hours of coursework in patient positioning, radiation safety, technology, medical physics, trauma, medical terminology among many other areas. This was followed by approximately 2,000 hours of hands-on clinical training under the direction of an experienced RT who was specially credentialed as an instructor. I then had to pass a rigorous examination administered by the American Registry of Radiologic Technologists (ARRT). Then to practice in Maryland, I obtained a license from the Maryland Board of Quality Assurance in Radiology. In order to maintain this license, I must take at least 24 hours of continuing medical education (CME) every 24 months.

In contrast, SB 830 would only require individuals to complete a total of 50 hours of education and clinical training to practice limited imaging. These individuals would be able to practice in all patient care settings without appropriate clinical supervision and lacking the comprehensive educational foundation of a fully licensed Radiologic Technologist.

The proposed education and training standards are a fraction of that for a RT. Patient quality and safety are not served through shortcuts in x-ray training. Poor training will lead to repeat procedures and/or inaccurate diagnoses; both of which will drive-up healthcare costs. While there is a shortage of RTs in Maryland, the solution is getting more candidates into the RT career path through training that is more affordable and accessible.

Thank you for the opportunity to bring this issue to your attention and for your consideration.

Sincerely,

Karen Trevathan