

**OREGON BOARD OF MEDICAL IMAGING**  
BOARD MEETING, April 25, 2014  
Portland State Office Building, 800 NE Oregon Street  
Conference Room "1-D"

**APPROVED MINUTES**

Board attendance: Thomas King (Chair), Frank Krause (Vice-Chair), Wayne Lemler, Kelly Solberg, Shirlee Templeton, William McMillen, Kimberly Earp, Pamela Warren, Dr. Akshay Gupta. Also Rick Wendt, (RPS; advisory member), David Howe (RPS; advisory member).

Others in attendance: Ed Conlow, Executive Director; Carol Parks, Senior Assistant Attorney General; Catherine Hess, OBMI Investigator; Michelle Van Kleeck, OBMI investigator; Sarah Anderson, Administrative Licensing Specialist; Vincent Mandina, Administrative LEDS Specialist.

Call to order: 8:35 a.m. by board chair Thomas King.

Executive session: Thomas King convened the board in executive session pursuant to ORS 192.660(2)(k) at 8:36 a.m.

Convene public session: Upon completion of executive session at 12:35 p.m., Chair Thomas King adjourned executive session and directed Board members to get lunch and return for public session, which convened at 1:01 p.m.

Approval of the previous meeting minutes

Approval of minutes from Board meeting of January 17, 2014: Motion by McMillen; second by Earp. Approved unanimously, without amendment.

Ratification of licenses: Motion to ratify by Earp; second by Templeton. Approved unanimously.

1. Radiographer licenses: From 171710 to 171773
2. Nuclear medicine licenses: 500273 to 500276
3. MRI licenses: From 400513 to 400529
4. Sonography licenses: From 601119 to 601146
5. Limited x-ray machine operator permits: From 4130 to 4141
6. Radiation therapy licenses: 270098 to 270105
7. All temporary initial medical imaging modality licenses and permits: R51156 to S51231

Investigative Case Vote:

Case 14-03-04: Motion by Earp, Second by Templeton, to close the case with no board action. Approved unanimously.

Case 14-02-03: Board motion is to grant the applicant a temporary permit, based upon the application that was submitted. Motion by Earp; seconded by Templeton. Approved unanimously.

Case 14-02-04: Motion by Earp; seconded by McMillen, to close the case with no Board action. Unanimously approved.

Case 14-03-01: Motion by Earp; seconded by Templeton, to issue a stipulated order for a \$500 civil penalty for practicing without a license in violation of ORS 688.415(1)(a), with the civil penalty based upon OAR 337-030-0010(3)(b). Second part of the motion is to issue a stipulated order for a \$500 civil penalty for \$500, in accordance with ORS 688.525(1)(g) and OAR 337-030-0010(3)(g), for making a false statement to the Board. The civil penalty for practicing without a license is waived due to mitigating circumstances, but the separate civil penalty for making a false statement to the Board is not waived. Approved unanimously.

Case 14-03-02: Motion by Earp; seconded by McMillen, to issue a stipulated order for a \$500 civil penalty for practicing without a license in violation of ORS 688.415(1)(a), with the civil penalty based upon OAR 337-030-0010(3)(b). The civil penalty is waived due to mitigating circumstances. Approved unanimously.

Case 14-02-05: Motion by Earp; seconded by Templeton, to grant the license contingent upon signing a stipulated agreement requiring the applicant's continued compliance with the ARRT Ethics Committee's Alternative Disposition Agreement dated April 30, 2013, as well as successful completion of all probationary requirements related to the applicant's consent agreement with the Arizona State Medical Radiologic Technology Board of Examiners, signed November 1, 2012. Approved unanimously.

Case 14-03-03: Motion by Earp; seconded by Templeton, to close the case with no Board action. Approved unanimously.

Case 14-04-02: Motion by Earp; seconded by Templeton, to close the case with no Board action. Approved unanimously.

Board ratification of civil penalties for practicing on expired license, with no Board appearance:  
Board ratification of civil penalties for violation of ORS 688.415(1) with civil penalties based upon OAR 337-030-0010:

- Motion to ratify \$100 civil penalty related to cases 13-11-02, 14-01-02, 14-01-03, 14-02-01, 14-02-02, 14-04-03, and 14-04-06. Motion by Earp, second by Templeton. Approved unanimously.

### **Old Business:**

Physician Assistants practicing fluoroscopy: Thomas King asked the Board if they wished to submit a legislative concept for 2015, in response to the Oregon Society of Physician Assistants' request for OBMI to create a pathway for PAs to practice fluoroscopy. Thomas King noted that there had been two meetings of a work group to discuss this issue, since the January 17 Board meeting. Mr. King said that there are tools already in place to help administer this type of program, including a curriculum developed jointly by the American Association of Physician Assistants and the American Society of Radiologic Technologists, and also including a fluoroscopy examination available through the American Registry of Radiologic Technologists. Mr. King said he would be more supportive of a legislative concept that also requires non-radiologist physicians to pass the ARRT fluoro exam, if they are supervising PAs who are performing fluoroscopy. Mr. King suggested that the legislative concept could be drafted in a general manner that would leave it up to the Board's rulemaking

process to determine the specific educational and examination pre-requisites to earn a fluoroscopy permit. During Board discussion, it was noted that the Oregon Medical Association had expressed opposition to including a provision to place requirements on non-radiologist physicians who supervise PAs doing fluoroscopy. Following Board discussion, Kimberly Earp made a motion to submit a legislative concept to create a pathway for PAs to practice fluoroscopy, with no specific requirements for physicians who supervise PAs. Shirlee Templeton seconded. Approved unanimously.

Allow OBMI to regulate imaging subspecialties: Ed Conlow explained that the legislative concept that is being proposed is to clarify in statute that the Board has the authority to regulate imaging licensure subspecialties. The intended purpose of the concept, based upon Board discussion, is to give the Board clear authority to write rules to require sonographers to have passed at least one registry exam in any general subspecialty area (general; vascular; cardiac) of sonography in which they practice. He explained that the legislative concept before the Board is identical to what the Board approved two years ago. After the Board submitted the legislative concept in 2012, for consideration by the Legislature in 2013, the Governor's office asked the Board to withdraw the concept, due to a number of letters of opposition that had been received by the Governor's office, expressing the opinion that the end result of the legislation would be to create very difficult conditions for a number of currently-licensed sonographers.

Chair Thomas King asked if anyone from the public wished to address the Board concerning this concept. Several persons from the audience addressed the Board. Lorraine Bevacqua, a former Board member, said that she was involved in writing the Board's 2010 legislation and that the Board already has the authority to regulate subspecialties by rule. Randy Jarigese RDMS(AB)(OB) spoke in opposition to the legislation. Pam Sprague spoke in opposition to the proposed legislative concept. Doug McRaney said that any regulation of sonography subspecialties should only regulate down to the three subspecialties of general, vascular and cardiac.

During Board discussion, Bill McMillen suggested that the Board sponsor symposia on this issue prior to the 2017 legislative session. Chair Thomas King suggested that the Board table the issue for now, and work with Bill McMillen's suggestion to conduct symposia on this subject, for the purpose of developing a plan to move forward, perhaps during the 2017 legislative cycle. No motion was offered to submit a legislative concept.

Request for HB 4074 waiver: Ed Conlow said that HB 4074, sponsored by Rep. Jenson who represents the La Grande area, was enacted during the 2014 short session in Salem, giving the Board the authority to issue waivers from the Board's national credentialing requirement in certain situations. Two technologists from Grande Ronde Hospital, Brian Buckingham and Pam Lathrop, submitted waiver requests to continue to be licensed to practice nuclear medicine at Grande Ronde Hospital. (Both had provisional nuclear medicine licenses that had recently expired.) The waiver requests, co-signed by Troy Juniper, imaging director at Grande Ronde Hospital, said that services to residents in the La Grande area would be severely impacted if waivers are not granted. Troy Juniper and Brian Buckingham attended the Board meeting by telephone. Shirlee Templeton proposed that the waivers be authorized to provide a waiver license for a one-year period, with renewal (after one year) contingent upon the waiver recipients passing the ARRT nuclear medicine examination under state sponsorship. Kimberly Earp made a motion that Brian Buckingham and Pam Lathrop be issued permanent licenses under the waiver, limited to one-year duration, with waiver conditions that each

must successfully pass the ARRT nuclear medicine exam (under state sponsorship) as a condition of renewing the waiver license. Seconded by McMillen. Approved unanimously.

Rulemaking to establish a \$52 fingerprint fee: The Board initiated the rulemaking at the January 17, 2015 Board meeting, with the intention of completing a fingerprint background check on first-time applicants for a license or permit, whether a temporary or permanent license or permit. Ed Conlow indicated that, of the \$52 total per fingerprint check, \$28 is paid to the Oregon State Police (OSP) and \$16.50 goes to the FBI; the Board keeps \$7.50 for administrative cost. Ed Conlow indicated that the Oregon Department of Administrative Services is completing a review and approval process for the fee, and that the OSP is also helping to complete preparations with the FBI necessary for the Board to initiate fingerprint checks on new applicants. Kimberly Earp made a motion, with Templeton seconding, to adopt the rule to authorize collection of the fingerprint fee on July 1, 2014, or later if the DAS review is not completed or if there are still details to be finalized with the FBI or the OSP. Approved unanimously.

Rulemaking to require a CT credential to do computed tomography: Chair Thomas King noted that there has been a number of public comments requesting delayed implementation. He said he would like to require a CT credential, as the rule states, but with flexibility for how it can be obtained, and with a transitional process that allows technologists enough time to earn the credential. Thomas King suggested tabling this item until the next meeting (July 18, 2014), so that those who worked on this rulemaking can review the public comment and settle on a transition plan toward implementation of this rule.

Audit of health licensing boards by the Secretary of State: Ed Conlow noted that the health licensing boards were the subject of a recent program audit by the Secretary of State's office, and that the results of the audit were generally complimentary toward the health licensing boards. He noted that he had recently attended a session with the Governor's staff, which had been organized in part due to an audit recommendation to provide more operational support to the health licensing boards, and also more board member training. Thomas King said that the audit recommended further consideration of background checks for licensed professionals who work with vulnerable populations, and that the OBMI's action to initiate fingerprint background checks is consistent with the audit recommendation. Thomas King said that he completed a dashboard on the different boards listed in the audit and, based upon dollar amounts and different criteria included in the audit, the OBMI compares very favorably.

**Public Comment:**

Several licensees approached the Board to express concern regarding the Board-approved legislative concept that would allow physician assistants to perform fluoroscopy after completing a curriculum with 40 hours didactic and 40 hours clinical training.

**Meeting Adjourned:** at 2:53 p.m.

Submitted by Ed Conlow