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ARTICLE 5. REPEALED

Article 5, consisting of R12-2-501 through R12-2-506, repealed by final rulemaking at 21 A.A.R. 573, effective June 6, 2015 (Supp. 15-2).

Article 5, consisting of R12-2-501 through R12-2-506, made by final rulemaking at 10 A.A.R. 3972, effective November 13, 2004 (Supp. 04-3).

Section
R12-2-501. Repealed
R12-2-502. Repealed

ARTICLE 6. REPEALED

Article 6, consisting of R12-2-601 through R12-2-605, repealed by final rulemaking at 21 A.A.R. 573, effective June 6, 2015 (Supp. 15-2).

Article 6, consisting of R12-2-601 through R12-2-605, made by final rulemaking at 10 A.A.R. 3972, effective November 13, 2004 (Supp. 04-3).

Section
R12-2-601. Repealed
R12-2-602. Repealed
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ARTICLE 1. GENERAL PROVISIONS

R12-2-101. Definitions
The definitions in A.R.S. § 32-2801 apply to this Article. In addition, the terms in this Chapter have the following meaning, unless the context otherwise requires:

“ARRT” means the American Registry of Radiologic Technologists.

“ASCP” means the American Society of Clinical Pathology.

“ASRT” means the American Society of Radiologic Technologists.

“ACR” means the American College of Radiology.

“Assistance” means any activity except the following: Positioning of the patient and x-ray tube, selecting technical settings, and exposing a patient to x-rays.

“Authorized user” means a physician licensed in Arizona to practice medicine and who is identified as:

An authorized user on an Agency, Nuclear Regulatory Commission (NRC), or Agreement State license that authorizes the specified medical use: or

A user in a medical use board scope program, licensed by the Agency, NRC, or Agreement State to select its own authorized users.

“Board” means the Medical Radiologic Technology Board of Examiners.

“Bone densitometry radiologic technologist” means a person who holds a certificate to apply ionizing radiation to a person’s hips, spine, and extremities through the use of a bone density machine.

“Brachytherapy” means a method of radiation therapy in which a sealed source or group of sealed sources is used to deliver beta or gamma radiation at a distance of up to a few centimeters, by surface, intracavitary, intraluminal, or interstitial application.

“CBRPA” means the Certification Board for Radiology Practitioner Assistants.

“Certification” means the process by which the Board grants permission and recognition to an individual to engage in radio-
logic technology upon finding the individual has met the qualifications specified by statute and rule.

“Chest radiography” means radiography performed to visualize the heart and lungs only.

“Computed tomography technologist” means a person who applies ionizing radiation to a human using a computed tomography machine for diagnostic purposes.

“Contrast media” means material intentionally administered to the human body to define a part or parts that are not normally radiographically visible.

“Diagnostic application” means the use of ionizing radiation for diagnostic purposes, including but not limited to, measuring and positioning patients or human tissue, selecting technical settings on x-ray equipment, and making x-ray exposures.

“Diagnostic dosage” means a prescribed amount of a radionuclide or radiopharmaceutical, which is used for a diagnostic purpose.

“Direct supervision” means an authorized user or licensed practitioner who is: personally aware of, and maintains independent professional responsibility for, the procedure intended for a given patient, present in the facility; and available for immediate assistance.

“Extremity” means the shoulder girdle to the phalanges and the lower two-thirds of the femur to the phalanges.

“Electronic brachytherapy” means a method of radiation therapy where an electrically generated source of ionizing radiation is placed in or near the tumor or target tissue to deliver therapeutic radiation dosage.

“Foot” means the distal part of the human leg upon which an individual stands and walks.

“General supervision” means guidance, direction, and instruction by an authorized user or licensed practitioner who is available, but not necessarily within the supervised individual’s place of employment.

“Healing arts radiography” means the application of radiation to human patients for diagnostic or therapeutic purposes by a licensed practitioner or a person certified in accordance with R12-1-603(B)(1). Healing arts radiography includes:

- Positioning the x-ray beam with respect to the patient;
- Anatomical positioning of the patient;
- Selecting exposure factors, dosage of radiopharmaceutical and agent, therapeutic dose; and
- Initiating or producing the exposure.

“Immediate supervision” means in-room presence for instruction, direction, and guidance by an authorized user or licensed practitioner who is available to assume control of the given procedure.

“ISCD” means the International Society for Clinical Densitometry.

“Licensed practitioner” means a person licensed or otherwise authorized by law to practice medicine, dentistry, osteopathy, chiropractic, podiatry, or naturopathy in this state.

“Medical event” means:

- The administration of a radiopharmaceutical or the radiation from a sealed source, administered for therapy purposes and involving:
  - The wrong radiopharmaceutical or sealed source;
  - The wrong patient;
  - The wrong route of administration; or
- A dosage that differs from the prescribed dosage by 20%; or
- The administration of a diagnostic dosage of a radiopharmaceutical involving:
  - The wrong patient;
  - The wrong radiopharmaceutical;
  - The wrong route of administration; or
- A dosage to an individual that exceeds 5 rems (.05Gy) effective dose equivalent or 50 rems (0.5Gy) dosage equivalent to any individual organ; or
- A therapeutic radiation dose from a sealed source such that errors in the source calibration, time of exposure, and treatment geometry result in a calculated total treatment dose differing from the final, prescribed total treatment dose by more than 10%.

“Medical use” means the intentional internal or external administration of byproduct material or the radiation from byproduct material to patients or human research subjects under the supervision of an authorized user.

“NMTCB” means the Nuclear Medicine Technology Certification Board.

“Nuclear medicine technologist” means a person who uses radiopharmaceutical agents on humans for diagnostic or therapeutic purposes. A.R.S. § 32-2815.

“Practical radiologic technologist” for purposes of this Chapter is equivalent to “practical technologist in radiology”; however, this title is further defined as a person authorized to use radiography, not fluoroscopy, or the use of contrast media, and limited to the chest and extremities, on humans, at the discretion of a licensed practitioner; unless

- The person is certified as a practical radiologic technologist in podiatry, in which case the person is limited to radiography of the lower leg, ankle and foot; or
- The person is certified as an “unlimited” practical radiologic technologist, in which case the person is not limited to radiography of the body areas in this definition; or
- The person is certified as a practical technologist in bone densitometry, in which case the person is limited to performing bone mineral densitometry of the distal extremities only.

“Qualified instructor” means a person who is recognized by the Board, provides education or training in the application of radiation to humans for diagnostic or therapeutic purposes, and has a relevant certification from the Board or a recognized certificate-granting body.

“Radiograph” means the record of images which represents anatomical details of the part radiographically examined and is formed by the differential absorption of ionizing radiation within the part.

“Radiography” means the use of ionizing radiation in making radiographs.

“Radiologist assistant” means a person who performs independent advanced procedures in medical imaging and interventional radiology under the guidance, direction, supervision and discretion of a licensed practitioner of medicine or osteopathy specializing in radiology (Radiologist).

“Radioisotope” means a radioactive element of a radioactive isotope.

“Radiopharmaceutical” means any drug that exhibits spontaneous disintegration of unstable nuclei with the emission of nuclear particles or photons and includes any nonradioactive
reagent kit or nuclide generator that is intended to be used in the preparation of the drug.

“Radiopharmaceutical agent” means a radionuclide or radio-
nuclide compound designed and prepared for administration to human beings.

“Special permit” means a certificate issued by the Board exempting an individual from the specific provisions of A.R.S. §§ 32-2802 through 32-2813.

“Specific direction” means the application of x-radiation to a specific area of the human body for diagnostic purposes while under the specific supervision of a licensed practitioner.

“Temporary certificate” means a certificate issued by the Board to any person who has completed a training program approved by the Board and whose certification is pending.

“Therapeutic application” means the use of ionizing radiation including, but not limited to, setting up the treatment position, delivering the required dose prescribed by the physician, certifying the record of the technical details of the treatment, selecting the required filter and treatment distance, making beam directional shells and molds, using diagnostic x-ray equipment for tumor localization, assisting the physicist in calibration procedure, and assisting in treatment planning procedures. Therapeutic application does not include taking x-rays for diagnostic purposes.

“Therapeutic purpose” means the use of radiation to treat human disease.

“Therapeutic Technologist” means a person who uses radiation on humans for therapeutic purposes.

“X-radiation” means penetrating electromagnetic radiation with wave-lengths shorter than those of visible light that is usually produced by bombarding a metallic target with fast electrons in a high vacuum, creating photons that originate from the extranuclear part of the atom.

Historical Note

R12-2-102. Certificate Granting Bodies
For the purpose of A.R.S. § 32-2812(C), the Board shall maintain a list of approved certificate granting bodies in all fields and specialties of Radiologic Technology.

Historical Note

R12-2-103. Communications
Any person interested in providing or receiving information concerning these rules or other matters should contact the Medical Radiologic Technology Board of Examiners.

Historical Note
Adopted as an emergency effective May 9, 1978, pursuant to A.R.S. § 41-1003, valid for only 90 days (Supp. 78-3). New Section R12-2-103 adopted effective August 24,
a. The reason for the denial with citation to supporting statutes or rules;
b. The applicant's right to seek an appeal of the denial; and
c. The time periods for appealing the denial.
2. If an applicant is found to be eligible, the applicant shall be notified and the application shall be provided to the Board for approval.

E. For the purposes of A.R.S. Title 41, Chapter 6, Article 7.1, the Board establishes the following time-frames in days:

<table>
<thead>
<tr>
<th>Type of Application</th>
<th>Administrative Completeness Review Time-frame in Days</th>
<th>Substantive Review Time-frame in Days</th>
<th>Overall Time-frame in Days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Certification or Permit</td>
<td>30</td>
<td>30</td>
<td>60</td>
</tr>
<tr>
<td>School Approval</td>
<td>60</td>
<td>60</td>
<td>120</td>
</tr>
</tbody>
</table>

**Historical Note**
Adopted as an emergency effective May 9, 1978, pursuant to A.R.S. § 41-1003, valid for only 90 days (Supp. 78-3). Emergency expired. New Section adopted by final rulemaking at 5 A.A.R. 1008, effective March 18, 1999 (Supp. 99-1). Section R12-2-104 repealed; new Section made by final rulemaking at 21 A.A.R. 573, effective June 6, 2015 (Supp. 15-2).

R12-2-105. Reserved

R12-2-106. Reserved

R12-2-107. Emergency expired

**Historical Note**
Adopted as an emergency effective May 9, 1978, pursuant to A.R.S. § 41-1003, valid for only 90 days (Supp. 78-3). Emergency expired.

R12-2-108. Emergency expired

**Historical Note**
Adopted as an emergency effective May 9, 1978, pursuant to A.R.S. § 41-1003, valid for only 90 days (Supp. 78-3). Emergency expired.

**ARTICLE 2. SCHOOLS AND TRAINING APPROVALS AND REQUIREMENTS OF RADIOLOGIC TECHNOLOGY**

R12-2-201. Radiologic Technology and Radiation Therapy Technology

A. An applicant seeking approval for a proposed radiologic technology school or radiation therapy school shall apply by letter and shall address all of the criteria listed for school approval in A.R.S. § 32-2804.
B. The Board shall review and approve or deny a school application according to the schedule in R12-2-104.
C. The Board shall maintain a list of radiologic and radiation therapy technology schools approved according to A.R.S. § 32-2804.
D. Upon completion of training, an applicant must either pass a Board-approved examination with a minimum score of 70% or in lieu of its own examination, the Board shall accept a valid certificate issued on the basis of an examination by a certificate-granting body recognized by the Board.
E. A radiologic technologist or radiation therapy technologist shall have obtained a minimum of 24 hours continuing education over the previous two years.

**Historical Note**
Adopted as an emergency effective May 9, 1978, pursuant to A.R.S. § 41-1003, valid for only 90 days (Supp. 78-3). New Section R12-2-201 adopted effective August 24, 1981 (Supp. 81-4). Amended by final rulemaking at 5 A.A.R. 1008, effective March 18, 1999 (Supp. 99-1). Section R12-2-201 repealed; new Section made by final rulemaking at 21 A.A.R. 573, effective June 6, 2015 (Supp. 15-2).

R12-2-202. Practical Radiologic Technology

A. Course Time-frame: The administrator of a school of practical radiologic technology shall ensure that the time-frame for the course of study shall not be less than six months or more than 24 months for completion of 210 hours of didactic training and 480 hours clinical training.

B. Clinical Training: A school may provide clinical training in one general facility or two specific clinical facilities.
1. "General clinical facility" means a hospital, clinic, or doctor's office that provides clinical training in both chest and extremity radiography. The clinical training shall consist of a minimum of 12 examinations per day per student, of which 30 percent are chest examinations and 70 percent are extremity examinations.
2. "Specific clinical facility" means a hospital, clinic, or doctor's office that provides clinical training in chest or extremity radiography. A specific clinical training program shall include a minimum of 12 examinations per day per student. The training period at a specific clinical facility devoted to chest examinations shall not exceed three weeks. The training period at a specific clinical facility devoted to extremity examinations shall not exceed nine weeks.

C. Equipment and Facilities:
1. A school is not required to have an energized laboratory and equipment, but if utilized, the laboratory and equipment shall conform to Arizona Radiation Regulatory Agency rules in 12 A.A.C. 1.
2. A school shall maintain a library of, or electronic access to current books, journals, and other reference material commonly used in and related to the curriculum and profession.

D. Program Administration: One or more individuals may be responsible for the school's administrative, supervisory, or educational duties. However, these responsibilities shall be clearly stated in the school's administrative policies.
1. The Program Director shall be responsible for the radiography educational program, and be one of the following:
   a. An Arizona certified radiologic technologist with a minimum of two years of post-certification experience and two years of teaching experience in a diagnostic radiologic technology program or equivalent, as determined by the Board, or its duly authorized representative;
   b. A radiologic physicist certified by the American College of Radiology or equivalent, as determined by the Board, or its duly authorized representative, with at least two years of experience as an instructor in an academic course of study in diagnostic radiologic technology or equivalent, as determined by the Board, or its duly authorized representative; or
   c. A radiologist certified by the American College of Radiology, or equivalent, as determined by the Board, or its duly authorized representative, with at least two years of experience as a lecturer in an academic course of study in diagnostic radiologic technology or equivalent, as determined by the Board, or its duly authorized representative.
2. An instructor shall be qualified through academic preparation and experience to teach the assigned subjects, as determined by the Board, or its duly authorized representative.
   a. An instructor who is an Arizona certified radiologic technologist shall teach the following subjects:
      i. Adult and pediatric positioning (radiologic),
      ii. Physics and technical factors,
      iii. Film processing,
      iv. Quality control,
      v. Film critique,
      vi. Survey of human disease, and
      vii. Radiation protection.
   b. A physician or other health professional shall teach a survey of human disease and a radiologic physicist or a radiologist shall teach radiation protection, quality control, and physics.
   c. Available during the training period in the clinical area when radiography procedures are being performed.

E. Didactic Training: a school shall provide the following minimum hours in each of the following subjects:
   1. Professional ethics (five hours).
      a. Definition of ethics, nature of ethics, and value of ethics to the practical technologist, patient, and medical profession;
      b. Professional secrecy and confidential knowledge regarding patients, physicians, and institutions;
      c. Practical technologist relationship to patients, other technologists, radiologists, attending physicians, and other members of the medical staff.
   2. Office procedures (five hours).
      a. An instructor shall stress office professionalism, including action, appearance, and speech. Special attention shall be given to handling telephone conversations so that essential information is obtained when scheduling radiography;
      b. Legal and ethical problems involving loan of radiographs, ordering examinations, ownership of equipment, visitors in the radiographic rooms, records, and use of equipment.
   3. Anatomy, physiology, and medical terminology.
   4. Adult and pediatric positioning (30 hours).
      a. General positioning nomenclature and terminology. An instructor shall familiarize each student with the terms: anterior, posterior, lateral, oblique, caudal, cephalad, tangential, supine, prone, upright, medial, flexion, extension, adduct, abduct and other terms used to correctly position patients for radiography;
      b. Procedure comprehension. Under classroom conditions, an instructor shall train each student so that the student is able to describe the anatomy visualized; describe the positions used, in terms of direction of the central ray and anatomical area of interest; name the size of film ordinarily used; describe patient preparation, if necessary; describe the special procedures applicable to radiographing specific regions of the body; identify radiographs of the basic radiographic positions; label the anatomic parts; explain variations in technical factors required for differences in patient habitus and similar anatomical areas of interest having different density and radiographic obstructions such as casts; explain how to avoid degradation of image quality from patient motion; and; describe variations in tube-film placement required to compensate for a patient's immobility.
      c. Procedure practice. In a laboratory situation, using a patient or a phantom, an instructor shall train each student so that the student is able to position the correct anatomical part, stabilizing or immobilizing the patient or phantom as needed; select the correct film size; align the x-ray tube to the anatomical part and film; and adjust the cone or collimator to the appropriate field size.
   d. Radiography of pediatric and geriatric patients. An instructor shall familiarize a student with the techniques necessary to sympathize and empathize with patients. In doing so, the instructor shall train each student to gain the patient's cooperation in obtaining a useful radiograph. Also, the instructor shall train each student to recognize the maneuverability of patients of all ages; devise methodologies necessary to obtain a satisfactory radiograph; relate with the patient in a manner which will not adversely affect a patient's psychological state; and provide comfort measures that will aid in obtaining high quality radiographs.
   5. Physics and technical factors (50 hours).
      a. The structure of matter: the atom, elements, compounds, substances, mixtures, and modes of ionization.
      b. Production and properties of x-rays: nature of electromagnetic radiation, production of x-rays, interactions of x-ray with matter, detection of ionizing radiation, and specification of the x-ray beam.
      c. X-ray tubes: early x-ray tubes, modern x-ray tubes, stationary anode tubes, rotating anode tubes, types of tube cooling, tube housings and beam restricting systems, x-ray tube characteristics, focal spots, x-ray tube rating charts, and tube cooling charts.
      d. Radiographic algorithms of a latent image and the prime factors of radiography (milliamperage, time, distance, and kilovoltage).
      e. Factors affecting radiographic quality (density, detail, contrast distortion, and magnification) as related to chest and extremities.
      f. Calibration, heat loading of x-ray tubes, conditions influencing choice of exposure factors, filters, grids, cones, cylinders, diaphragms, calipers, cassettes, film holders, technique charts, and identification system.
      g. Discussions, problems, and experiments related to time, source image receptor distance, milliamper- age, peak kilovoltage, and the relationships that can be established with combinations of each of these parameters, shall be provided to each student.
      a. Darkroom construction, equipment, and arrangement; illumination and test for illumination, and x-ray film: handling, developing, rinsing, fixing, washing, and drying.
      b. Preparation of solutions, types, care of processing apparatus, automatic processing, reduction of over-
exposed and underexposed radiographs, and film artifacts and their uses.

c. Digital Image Processing

7. Quality control (10 hours). An instructor shall train each student in the following subject areas: evaluation of film system procedures, radiographic machines, image quality, film screens, film holders, and grids.

8. Film and Image critique (20 hours).
   a. Patient's relevant clinical data: reasons for radiographic examination (pathology) and assessment of the patient during the radiographic examination.
   b. Technique employed: technical factors and source image receptor distance.
   c. Collimation and shielding: film size, field size, shielding, and markers.
   d. Positioning: basic positioning and devices.
   e. Anatomy: radiographic anatomy and anatomical anomalies.
   f. Radiographic quality: density, contrast, resolution, distortion and magnification, fog, grids, film screens, film processing, and image artifacts.

9. Survey of diseases (five hours). Disease and injury encountered in the radiography of chest and extremities.

10. Nursing procedures (10 hours). An instructor shall train each student in patient care, including emergency procedures.

11. Radiation protection (30 hours).
   a. Atomic structure, properties of radiation, modes of x-ray production, x-ray interaction with matter (absorption processes), units of radiation exposure and dosage, personal dosimetry and survey instruments, mechanisms of biological damage (stochastic and nonstochastic effects).
   b. History and basic principles of radiation protection, standards for protection against ionizing radiation, including the principles of “ALARA” (As Low As Reasonably Achievable); methods for reducing exposure to personnel and patients, including the correct use of collimator, filtration, proper kilovoltage and milliampere, time settings; formulation of x-ray exposure techniques; and special radiation protection measures for x-ray examinations. An instructor shall demonstrate the importance of time, distance and shielding, and scattering of x-rays.

F. School Approval:
   1. An applicant seeking to open a Practical Radiologic Technology School shall apply to the Board by letter and shall address all of the criteria in R12-2-202.
   2. The Board shall review a school application in a timely manner as required in R12-2-104 and approve or deny the application.
   3. The Board shall maintain a list of approved schools.

G. Upon completion of training, an applicant must pass a Board-approved examination with a minimum score of 67%.

H. A practical technologist in radiology shall have obtained a minimum of six hours continuing education over the previous two years.

R12-2-203. Practical Technologist in Bone Densitometry and Podiatry

A. Practical technologist in bone densitometry:
   1. An applicant shall provide evidence of having completed a total of 80 hours of instruction from qualified instructors in the following subjects: radiation safety, conventions in densitometry, densitometry techniques, anatomy, precision and accuracy, quality control, osteoporosis overview, and understanding data.
   2. An applicant must pass a Board-approved Limited Bone Density examination with a minimum score of 70%.

B. Practical technologist in podiatry:
   1. An applicant shall provide evidence of having completed a Board-approved didactic course in Podiatry Radiology, complete clinical training under a state-licensed podiatrist, and provide the Board with images independently taken for review by the Board’s director and an independent, licensed podiatrist.
   2. The applicant must pass a Board-approved Podiatry Radiology or a Limited Bone Density examination with a minimum score of 70%.

C. A practical technologist in podiatry shall have obtained a minimum of two hours continuing education and a practical technologist in bone densitometry shall have obtained a minimum of one hour continuing education over the previous two years.

Historical Note

R12-2-204. Nuclear Medicine Technology

A. Based on the following factors, the Board may approve a school of nuclear medicine technology as maintaining a satisfactory standard if its course of study:
   1. Is for a period not less than 12 months of full-time study or the equivalent and is accredited by the Joint Review Committee on Education in Nuclear Medicine or meets or exceeds the standards of the Joint Review Committee on Education in Nuclear Medicine as determined by the Board.
   2. Includes not less than 1900 contact hours, including but not limited to: methods of patient care, radiation safety and protection, nuclear medicine, physics and radiation physics, nuclear instrumentation, statistics, radionuclide chemistry and radiopharmacy, departmental organization and function, radiation biology, nuclear medicine in-vivo and in-vitro procedures, radionuclide therapy, computer application, clinical education, and medical law and ethics.

B. The Board shall maintain a list of approved schools.

C. Upon completion of training, an applicant must either pass a Board-approved examination with a minimum score of 70% or, in lieu of its own examination, accept a valid certificate issued on the basis of an examination by a certificate-granting body recognized by the Board.

D. A nuclear medicine technologist shall have obtained a minimum of 24 hours continuing education over the previous two years.

Historical Note
R12-2-205. Bone Densitometry Technology
A. An applicant seeking approval for bone densitometry training shall apply by letter and shall address the curriculum offered for approval.
B. The Board shall review and approve the training application according to the schedule in R12-2-104.
C. The Board shall maintain a list of bone densitometry trainings approved.
D. An applicant must possess a valid state certification in radiologic technology or upon completion of training, an applicant must either pass a Board-approved examination with a minimum score of 70%, or in lieu of its own examination, the Board may accept a valid certificate issued on the basis of an examination by a Board-recognized, certificate-granting body.
E. A bone densitometry technologist shall have obtained a minimum of 24 hours continuing education over the previous two years.

Historical Note

R12-2-206. Mammography Technology
A. An applicant must possess certification in Radiologic Technology.
B. The applicant shall complete 40 hours of didactic instruction and at least 160 hours of clinical instruction taught by a facility accredited by the American College of Radiology and registered by this state under A.R.S. § 32-2841(B).
C. The applicant shall have obtained a valid Mammography Training Approval Form from the Board during the training.
D. Upon completion of training, an applicant must either pass a Board-approved examination with a minimum score of 70%, or in lieu of its own examination, accept a valid certificate issued on the basis of an examination by a certificate-granting body recognized by the Board.
E. A mammography technologist shall have obtained a minimum of 24 hours continuing education, with at least eight hours being mammography specific, over the previous two years.

Historical Note

R12-2-207. Computed Tomography Technology
A. An applicant must possess certification in radiologic technology, nuclear medicine, or radiation therapy, and
B. Have at least two years documented computed tomography experience with at least 12 continuing education hours specific to computed tomography received over the past two years; or
C. Possess an advanced postprimary certification from a Board-recognized, certification-issuing agency in computed tomography.
D. A computed tomography technologist shall have obtained a minimum of 24 hours continuing education over the previous two years.

Historical Note

R12-2-208. Radiologist Assistant
A. An applicant must possess certification in radiologic technology, nuclear medicine or radiation therapy, and
B. Have completed an advanced academic program recognized by the Board, ARRT, ACR, NMTCB, or CBRPA.
C. The applicant shall complete at least a one-year advanced clinical preceptorship under the supervision of one or more licensed practitioners who are American Board of Radiology certified radiologists.
D. Beginning January 1, 2009, the applicant shall hold a baccalaureate degree from an accredited educational institution.
E. The Board shall maintain a list of approved academic programs.
F. Upon completion of training, the Board will accept a valid certificate issued on the basis of an examination by a certificate-granting body recognized by the Board.
G. A radiologist assistant shall have obtained a minimum of 50 hours continuing education over the previous two years.

Historical Note
New Section made by final rulemaking at 21 A.A.R. 573, effective June 6, 2015 (Supp. 15-2).

ARTICLE 3. APPLICATION AND CERTIFICATION OF RADIOLOGIC TECHNOLOGISTS AND RADIOLOGIST ASSISTANTS

R12-2-301. Applications
With respect to the application procedure outlined in A.R.S. § 32-2812(A) and (B):
1. The Board accepts a passing score on the high school equivalency test (G.E.D.) as evidence of successful completion of high school or its equivalent.
2. On a notarized Board application form for certification, or as an attachment to a completed and notarized Board application, an applicant shall provide the following information:
   a. Copy of current American Registry of Radiologic Technologists (ARRT) or Nuclear Medicine Technology Certification Board (NMTCB) or Certification Board for Radiology Practitioner Assistants (CBRPA) or The International Society for Clinical Densitometry (ISCD) wallet card, if applicable, or documentation of passing a Board-approved examination;
   b. Copy of continuing education documentation, if applicable;
   c. Copy of any degree, diploma, or certificate from an approved radiologic or practical radiologic technology school;
   d. Passport size Photo;
   e. Certification fee;
   f. Name, address, and telephone number;
   g. Birth date, sex, and social security number;
   h. Purpose of application and current licensure or certificate number, if applicable;
   i. Employment information for the last three years;
   j. Education information;
   k. Criminal, moral, license/certification history; and
   l. Signature and date of signature of the applicant.

Historical Note
Adopted effective August 24, 1981 (Supp. 81-4). Section R12-2-301 repealed; new Section adopted effective December 9, 1998 (Supp. 98-4). Section R12-2-301 repealed; new
Section made by final rulemaking at 21 A.A.R. 573, effective June 6, 2015 (Supp. 15-2).

R12-2-302. Qualifications  
A. The Board shall issue a radiologic, nuclear medicine, radiation therapy, mammography, practical technologist in radiology, podiatry, or bone densiometry, computed tomography, or bone densiometry technology or radiologist assistant certificate if the applicant meets the applicable qualifications prescribed in A.R.S. §§ 32-2812, 32-2813, 32-2814, 32-2815, 32-2819, or 32-2841 and Article 2.  
B. An applicant or an inactive certificate holder who has not practiced radiologic technology during the prior three years shall pass an examination approved by the Board before certification.

C. Upon failing a certification examination a third time, a radiologic or a practical radiologic technologist applicant shall repeat the entire course of training or complete a school prescribed refresher tutorial course prior to retaking the examination.

Historical Note  
Adopted effective August 24, 1981 (Supp. 81-4).  

R12-2-303. Fees  
A. Under A.R.S. §§ 32-2812(A) and 32-2815(A), the application fee is a non-refundable $60, which may be prorated quarterly over the two year certification period for all radiologic technology specialties with the exception of mammography, for which the application fee is $20 under A.R.S. § 32-2841(A)(1).  
B. The two year renewal fee is $60 with the exception of the renewal fee for mammography, which is $20.

Historical Note  
New Section made by final rulemaking at 21 A.A.R. 573, effective June 6, 2015 (Supp. 15-2).

R12-2-304. Renewals  
A. If the applicant’s last name begins with the letter A through M, the certificate expires on the holder’s birth month in every even numbered year, except as provided in A.R.S. § 32-4301. All others expire on the holder’s birth month in every odd numbered year.

B. The Board may renew a certificate for two years on payment of the fee and submission of a completed renewal application containing all information requested by the Board to show the applicant for renewal is a technologist in good standing.

C. A certificate holder who fails to renew the certificate on or before expiration, but within 30 days of expiration, shall pay a penalty late fee of $50.

D. A certificate holder who fails to renew the certificate beyond 30 days of expiration and who continues to practice radiologic technology will be subject to disciplinary action, which may include censure, reprimand, or denial of renewal by the Board.

E. On request of a certificate holder in good standing, the Board may place the certification on inactive status. The Board may reinstate the certificate on receiving a renewal/reactivation application and payment of the renewal fee, which will be prorated.

F. An expired certificate, that is not renewed within 30 days after the certificate expires, cannot be renewed. An individual, who fails to renew a certificate in a timely manner, shall reapply.

Historical Note  
New Section made by final rulemaking at 21 A.A.R. 573, effective June 6, 2015 (Supp. 15-2).

R12-2-305. Display of Certificate  
A. Every technologist, radiologist assistant or special permit holder shall display an original certificate at the place of employment. Upon secondary employment, the original certificate shall be displayed at the primary place of employment, with a copy posted at the secondary place of employment that documents where original certificate is posted.

B. The Board may issue a replacement certificate for a $10 processing fee when:
   1. A holder of a certificate submits documentation of a legal name change.
   2. A holder of a certificate submits a statement describing, to the best of their knowledge, the circumstances of a loss or destruction of the original certificate.

Historical Note  
New Section made by final rulemaking at 21 A.A.R. 573, effective June 6, 2015 (Supp. 15-2).

ARTICLE 4. SCOPE OF PRACTICE

R12-2-401. Radiologic Technology, Mammography, and Radiation Therapy Technology  
A. Radiologic technologists shall meet the parameters determined by the profession through the 2013 American Society of Radiologic Technologists Radiography Practice Standards incorporated by reference and available for inspection or copying at the Arizona Radiation Regulatory Agency, 4814 S. 40th St., Phoenix, AZ 85040. This incorporated material is also available from ASRT Communications Department, 15000 Central Avenue, Albuquerque, NM 87123-3909 or http://www.asrt.org/main/standards-regulations/practice-standards/practice-standards. This incorporated material contains no future editions or amendments.  
B. Mammography technologists shall meet the parameters determined by the profession through the 2012 American Society of Radiologic Technologists Mammography Practice Standards incorporated by reference and available under R12-1-401(A). This incorporated material contains no future editions or amendments.  
C. Radiation therapy technologists shall meet the parameters determined by the profession through the 2011 American Society of Radiologic Technologists Radiation Therapy Practice Standards incorporated by reference and available under R12-1-401(A). This incorporated material contains no future editions or amendments.

Historical Note  

R12-2-402. Practical Radiologic Technology  
A. Certified practical technologists in radiology are permitted to perform radiographic examinations of the chest and extremities only. The upper extremity includes the shoulder girdle to the phalanges, and the lower extremity excluding the upper one-third of the femur to the phalanges. Chest radiography may be performed to visualize the heart and lungs only.

B. Certified practical technologists in podiatry are permitted to perform radiographic examinations of the lower leg, ankle and foot only.
C. Certified practical technologists in bone densitometry are permitted to perform bone mineral densitometry of the distal extremities only.

D. Certified practical technologists listed in subsections (A), (B), and (C) are prohibited from conducting fluoroscopic examinations or injection of contrast. Unless otherwise prohibited in this Chapter, practical technologists shall also meet the parameters determined by the profession through the 2013 American Society of Radiologic Technologists Limited X-Ray Machine Operator Practice Standards incorporated by reference and available under R12-1-401(A). This incorporated material contains no future editions or amendments.

E. Certified practical technologists unlimited are permitted to perform all examinations a certified radiologic technologist is allowed to perform in accordance with the scope of practice listed under R12-2-401(A).

**Historical Note**

**R12-2-403. Nuclear Medicine Technology**
Nuclear medicine technologists shall meet the parameters determined by the profession through the 2012 American Society of Nuclear Medicine and Molecular Imaging’s Nuclear Medicine Technologist Scope of Practice incorporated by reference and available for inspection or copying at the Arizona Radiation Regulatory Agency, 4814 S. 40th St., Phoenix, AZ 85040. This incorporated material is also available from the Society of Nuclear Medicine and Molecular Imaging, 1850 Samuel Morse Drive, Reston, Virginia 20190 or http://interactive.snm.org/docs/Scope_of_Practice_NMT_6-8-2012_FINAL.pdf. This incorporated material contains no future editions or amendments.

**Historical Note**

**R12-2-404. Bone Densitometry Technology**
Bone densitometry technologists shall meet the parameters determined by the profession through the 2011 American Society of Radiologic Technologists Bone Densitometry Practice Standards incorporated by reference and available under R12-1-401(A). This incorporated material contains no future editions or amendments.

**Historical Note**

**R12-2-405. Computed Tomography Technology**
Computed tomography technologists shall meet the parameters determined by the profession through the 2013 American Society of Radiologic Technologists Computed Tomography Practice Standards incorporated by reference and available under R12-1-401(A). This incorporated material contains no future editions or amendments.

**Historical Note**
Radiation Regulatory Agency – Medical Radiologic Technology Board of Examiners

R12-2-602. Repealed

**Historical Note**
New Section made by final rulemaking at 10 A.A.R. 3972, effective November 13, 2004 (Supp. 04-3). Section R12-2-602 repealed by final rulemaking at 21 A.A.R. 573, effective June 6, 2015 (Supp. 15-2).

R12-2-603. Repealed

**Historical Note**
New Section made by final rulemaking at 10 A.A.R. 3972, effective November 13, 2004 (Supp. 04-3). Section R12-2-603 repealed by final rulemaking at 21 A.A.R. 573, effective June 6, 2015 (Supp. 15-2).

R12-2-604. Repealed

**Historical Note**
New Section made by final rulemaking at 10 A.A.R. 3972, effective November 13, 2004 (Supp. 04-3). Section R12-2-604 repealed by final rulemaking at 21 A.A.R. 573, effective June 6, 2015 (Supp. 15-2).

R12-2-605. Repealed

**Historical Note**
New Section made by final rulemaking at 10 A.A.R. 3972, effective November 13, 2004 (Supp. 04-3). Section R12-2-604 repealed by final rulemaking at 21 A.A.R. 573, effective June 6, 2015 (Supp. 15-2).