



MONTANA STATE HOSPITAL POLICY AND PROCEDURE

Radiographic Imaging Equipment Usage

Effective Date: March 15, 2017

Policy: RD-05

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- I. PURPOSE:** Provide radiology services to serve patients at Montana State Hospital (MSH).
- II. POLICY:** It is the policy of MSH that only qualified medical personnel operate the medical imaging equipment as set forth by the State of Montana.
- III. DEFINITIONS:**
 - A. ARRT: American Registry of Radiologic Technologists.
 - B. Licensed Independent Practitioner : an active, provisional or part-time physician or APRN and/or CNS who attends to the care of the patients at MSH.
 - C. Registered Radiology Technologist (RT): current American Registry of Radiologic Technologists (ARRT) and State of Montana license holder under contract to provide services to MSH.
 - D. Limited Permit Technologist (LPT): current State of Montana limited permit radiology technologist license.
 - E. Radiologist: radiologist certified by the American Board of Radiology having a current State of Montana Medical License and is under contract to provide radiology services to MSH.
- IV. RESPONSIBILITIES:**
 - A. Human Resource Department – ensures current licensing for non-Licensed Independent Practitioner radiology personnel.
 - B. Administrative Assistant to Clinical Services: ensures radiologist is credentialed and approved for privileges in accordance with MSH policy MS-01, Credentialing and Privileging.
- V. PROCEDURE:**
 - A. Registered Radiologic Technologists must have a current ARRT license and a Montana State License in order to provide services in the Radiology Department. Limited Permit Technologists must have completed and passed the Montana State test and have a current state license in order to work in the Radiology Department. Limited Permit Technologist may only perform those examinations that are listed on their state license, unless the technologist is currently enrolled in an accredited school, and accompanied by a registered radiologic technologist.

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- B. Only the following personnel are allowed to operate the imaging equipment:
1. Registered Radiologic Technologist,
 2. Limited Permit Technologist,
 3. Radiologists.

VI. REFERENCES: None.

VII. COLLABORATED WITH: Limited Permit Radiology Technologist, Associate Director of Nursing, Medical Director; Registered Radiology Technologist; and Radiologist.

VIII. RESCISSIONS: None, new policy

IX. DISTRIBUTION: All hospital policy manuals.

X. ANNUAL REVIEW AND AUTHORIZATION: This policy is subject to annual review and authorization for use by either the Administrator or the Medical Director with written documentation of the review per ARM § 37-106-330.

XI. FOLLOW-UP RESPONSIBILITY: None.

XII. ATTACHMENTS: None.

Signatures:

Jay Pottenger
Hospital Administrator

Thomas Gray, M.D.
Medical Director