Discipline	Educational Requirements	Competency Related Criteria	Other General Criteria
Radiology Practitioner Assistant (RPA)	1. <u>Current</u> Certification and Registration by the American Registry of Radiologic Technologists(ARRT)	1. Written approval granted by supervising radiologist(s) currently appointed to the Medical Staff of the Hospital to supervise the RPA's practice in the Hospital, i.e. signature on 1) The Application and Delineation of Clinical Functions and the 2) <u>Letter of Agreement</u> <u>submitted outlining the</u> <u>delegation of services to a</u> <u>Radiology Practitioner</u> <u>Assistant (RPA) by</u> <u>supervising radiologist(s):</u> <u>the delegation of medical</u> <u>services must be</u> in compliance with the requirements of the delegation of duties regulation promulgated by the State Board of Medicine at 49 Pa. Code 18.402. <u>Letter of Agreement must</u> <u>be resubmitted at</u> <u>reappointment and at</u> <u>such time as there may be</u> <u>a change in supervising</u> <u>physician(s).</u>	1. Evidence of adequate professional liability insurance required by the Board.
	2. Applicant should demonstrate that he/she has provided services to at least 200 patients during the past 12 months (time in clinical training can fulfill this requirement).	2. Three (3) letters of reference are required to include at least one board certified radiologist who is familiar with the applicant's skills, one from a radiologic technologist and any one (1) of the following: (1) educational director, (2) clinical preceptor or other radiologists who have served at clinical facility, (3) chairman of the clinical department from his/her primary practice site for the previous two years.	2. Agree to abide by appropriate rules and regulations as outlined and applicable in the Medical Staff Bylaws, Rules and Regulations and Hospital policies.

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	3. Be a graduate of an educational program recognized by the ARRT or the <u>Certification</u> <u>Board for Radiology</u> <u>Practitioner Assistants</u> (<u>CBRPA</u>).	3. Completion of Clinical Interview with Administrative Director/Radiology	3. Signed statement of overall responsibility by employing physician.
	• Certified by the CBRPA or considered eligible for the CBRPA certification examination (must be certified within 12 months of graduation).		
	4. Completion of a Bachelor of Science Degree	4. Individual must demonstrate competence with each procedure/examination as assessed by a supervising radiologist; log to be provided.	4. Maintain a current BLS-CPR (Basic Life Support) and ACLS (Advanced Cardiac Life Support) certification.
	5. Continuing education activities are required and are evidenced by current certification of the ARRT and CBRPA.	5. Provisional period of one (1) year is required. A written evaluation must be completed at the end of the provisional period by the peer reviewer indicating that RPA has demonstrated appropriate skills to carry out the clinical functions as stated. The provisional period maybe extended for additional six (6) months as deemed necessary by the appropriate Medical Staff Department.	5. Maintain values congruent with the Code of Ethics of the ARRT and the CBRPA, as well as adhering to the national, state, institutional, and departmental standards, policies, and procedures regarding the standards of care for patients.
		5. Periodic review will be done every two (2) years.	6. Satisfactory recommendation regarding ability to relate to others.

8/16/07

Initial clinical competencies check off list for the <u>Radiology Practitioner Assistant</u> (<u>RPA</u>)

Before a RPA can perform any examination or procedure independently the lead and/or supervising radiologist will provide personal supervision of the RPA for a minimum of (three) 3 times per procedure (this may include the clinical training if the training was supervised by the same lead and/or supervising radiologist as long as the training was within 6 months of hire) *and logs must be provided*.

Name: ______ RPA

Date of hire:

		Observation		
Procedure/examination		2	3	
Perform fluoroscopic guidance for contrast				
studies of the GI and GU system				
Placement of Foley catheters and enteric tubes				
Drug administration-the preparation, identification				
and administration of contrast media,				
radiopharmaceuticals and/or medications needed				
to perform radiological procedures				
Biliary tube checks				
Nephrostomy tube checks				
Gastric/G&J tube checks				
Port/Dialysis tube checks				
Fistulagram/Sinograms				
Loopograms				
Indwelling drainage catheter checks other than				
listed above: i.e. abscess drainage catheters,				
intraluminal and extraluminal drainage catheters				
Percutaneous access of superficial				
arterial and venous structures for diagnostic				
radiologic procedures				
Placement of non-tunneled central venous catheters/PICC				
Sialogram				
<u>Venipuncture</u>				
Venograms				
Myelograms				
Removal of devices for invasive radiologic procedures				
Removal or exchange of catheters and drainage tubes				
Breast needle localizations				
Injections for lymphoscintigraphy				
Lumbar punctures				
Injections into major joints (shoulder, hip, knee)				
Injections into minor joints (wrist)				
Paracentesis with sonographic guidance				
Thoracentisis with sonographic guidance				
Image guided biopsies: CT, fluoroscopic, and				

sonographic guidance		
Stereotactic core biopsy		
Ultrasound guided FNA/BX of the breast		

Signature of Applicant

Date

Signature of Primary Supervising Physician

Date

8/16/07; 5/13

Name: _

Dependent Limited Health Professional Position Applied for Radiology Practitioner Assistant (RPA)

DELINEATION OF CLINICAL FUNCTIONS for Radiology Practitioner Assistant (RPA)

<u>The RPA will act only under the supervision of radiologist(s) on the Medical Staff who</u> have delegated the following specific duties to the RPA. RPAs are restricted to the scope of practice of the supervising physician(s).

<u>Privileges: – All privileges delegated may be exercised under the direct guidance and or</u> <u>medical direction of the responsible radiologist and the radiologist must be present in</u> <u>the facility at the time of the procedure. Before a RPA can perform any examination or</u> <u>procedure independently the supervising radiologist will provide personal supervision</u> <u>of the RPA for a minimum of (three) 3 times per procedure (this may include the</u> <u>clinical training if the training was supervised by the same supervising radiologist as</u> <u>long as the training was within 6 months of hire) and logs can be provided.</u>

8/16/07; Revised 5/13

Appendix A

Drugs delivered by the RPA will be under the supervision of a radiologist and within the scope of practice of the RPA under the following drug classifications but not limited to:

Contrast Medias

Radiopharmaceuticals

Local Anesthetics

with or without sodium bicarbonate

with or without epinephrine for appropriate location and use

• <u>with epinephrine: in deep tissue of the breast for breast core</u> <u>biopsy</u>

<u>Corticosteroids</u> For intra-articular injections

Topical antibiotics For site/wound care