

# Letters to the Editor

## Proposed Federal Regulations Affecting Nuclear Medicine Technologists

On July 11, 1980, I received a 24-page copy of a proposed rule in the *Federal Register*, vol. 45, no. 12, Friday, June 20, 1980, pages 41794-41818. The proposed rule is for the Department of Health and Human Services, 42 CFR parts 405, 481, and 482, Medicare and Medicaid Programs Conditions of Participation; Hospitals Agency; Health Care Financing Administration.

The proposed rule states that "the proposed amendments would simplify the regulatory requirement which hospitals must meet to be certified for participation in Medicare and Medicaid." For reimbursement purposes, "The amendments are intended to hold down cost while maintaining an acceptable level of patient care. The amendments establish minimum requirement and are not intended to limit hospitals from establishing higher requirements." Comment period ended Aug. 19, 1980. These rules represent a totally new set of requirements for nuclear medicine service, no. 482.3 and 482.43.

Page 41804 states that a "nuclear medicine technologist" is an individual who:

1. is eligible to take the examination for registration as a nuclear medicine technologist by the American Registry of Radiologic Technologists and has one year of experience as a nuclear medicine technologist within the last three years; or
2. is a registered nurse, registered medical technologist, or a college graduate who has a bachelor of science degree with a major in biologic or natural science and has successfully completed a 1-year educational program in nuclear medicine technology accredited by the Committee on Allied Health Education and Accreditation (CAHEA) of the American Medical Association in cooperation with the Joint Review Committee on Education in Radiologic Technology; or
3. prior to Jan. 1, 1976, met the requirements of this section for radiographer, or is a registered nurse or medical technologist and has successfully completed two years of on-the-job training in nuclear medicine technology under the supervision of a physician who meets the requirements for certification in nuclear medicine radiology by the American Board of Pathology, the American Board of Internal Medicine, the American Osteopathic Board of Nuclear Medicine, or the American Board of Nuclear Medicine.

If implemented, these rules would

1. save hospitals a lot of dollars in salaries because

nuclear medicine technologists would *again* be allied with x-ray technologists;

2. void persons certified only by the NMTCB examination; and
3. not accept an equivalent for certification examinations because it is not in the regulations.

The proposed rule uses the word "eligible," which to me implies that someone is eligible but has not passed the ARRT certification examination. Apparently, these people could be classified as "technologists" and not technicians. As for medical technologists, there is no requirement to take the ASCP nuclear medicine examination—one year of on-the-job training is all that is required.

I am concerned about two things. The first is that even after George Alexander's April 3, 1980 testimony to Senator Jennings Randolph's Subcommittee on S. 500, nuclear medicine technology is still being allied with x-ray technology (now called radiographers) and not being recognized as a separate medical specialty. Secondly, I found out about these proposed rules, *not* the Society of Nuclear Medicine and the American College of Nuclear Physicians.

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## Reply

While we at the National Office receive the *Federal Register*, we frequently experience postal service delays. In any event, we often receive multiple calls from other groups and individuals who subscribe to the *Register* and identify specific areas for Society action. While sometimes redundant, this process is helpful because we are virtually assured of not overlooking anything.

Upon being made aware of the filing in the *Federal Register* of June 20, 1980, I contacted Michael L. Cianci. I was planning to be in the Baltimore area in August, so Mike and I arranged to meet with Janet Harryman, Director of the Division of Hospital Services, Office of Standards and Certification, Health Standards and Quality Bureau. Ms. Harryman and her key staff people are involved with definitions of nuclear medicine director, nuclear medicine technologist, and nuclear medicine service. Our comments and input were very well received that day. Upon my return to the National Office, our comments were put in writing and forwarded to the Health Care Financing Administration in a timely fashion.

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