

December 9, 2016

Sunset Commission Hearing

Public Testimony

Good Morning,

My name is Charlotte Swenson. I have been a registered Radiologic Technologist since 1978. As Program Director, I am in the field often visiting with sites that host our LMRT students. I find the sites utilize the LMRT in many areas of the facility. Most are cross trained in medical assisting duties, along with front desk and triage. The LMRT license was created several years ago to cover the shortage of R.T.s in the field. The shortage is a result of the RT programs statewide having long waiting list to start the program with limited spots for students. Both of these are a result of regulations driven by the A.R.R.T., the national accrediting body of Radiologic Technologist.

Furthermore, NCT's receive only 120 hours of training, with no clinical experience whatsoever. LMRT's receive 1500 hours (900 didactic, 600 clinical externship) to become qualified to sit for the state exam.

With the several components of the exam, skull, extremities, vertebral column, chest and the core, licensing can be difficult. The person gets frustrated and fails to sit for the exam and then steps down to a NCT. That may be reason for the disparaging numbers in LMRT and NCT's. Making the exam comprehensive and with a pass or fail system would alleviate the administrative burden quite a bit.

In the field, the LMRT covers the areas that R.T.'s typically don't want to work, such as urgent care facilities, private doctor's offices and chiropractic. The LMRT licensure offers the individual an opportunity to further their education as an RT if they so choose. It also offers a career on its own that one can be proud of.

I am opposed to the Commission's recommendation of eliminating the LMRT license.

Thank you.