

From: [Sunset Advisory Commission](#)
To: [Janet Wood](#)
Subject: FW: Form submission from: Public Input Form for Agencies Under Review (Public/After Publication)
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-----Original Message-----

From: sundrupal@capitol.local [<mailto:sundrupal@capitol.local>]
Sent: Sunday, June 22, 2014 11:29 PM
To: Sunset Advisory Commission
Subject: Form submission from: Public Input Form for Agencies Under Review (Public/After Publication)

Submitted on Sunday, June 22, 2014 - 23:28

Agency: DEPARTMENT STATE HEALTH SERVICES DSHS

First Name: April

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Organization you are affiliated with: ARRT

City: Lubbock

State: Texas

Your Comments About the Staff Report, Including Recommendations Supported or Opposed:

After reading the Sunset Advisory Commission report on DSHS I have found that there are several misconceptions about how come we need licensure for several fields that are already in a highly regulated atmosphere. I can only speak confidently about my own field and shall stick with Medical Radiologic Technologists.

One statement was that the Doctor was primarily responsible for the patient's outcome. Doctors are highly trained to examine the patient, talk to the patient, order exams, and evaluate the results into what will become a plan to treat the patient. If you told the physician that they had to actually perform the test they would be lost.

They count on us to do a professional job of getting a diagnostic test with the least amount of radiation which IS harmful to the human body at any level but you have benefit vs. harm. We have the education and training to do this well. This is our specialty.

Nurses have training on treating patients and completing orders. They evaluate patients, determine if they are emergencies or routines. They are patient advocates. Again they know nothing about how to take a radiograph or to keep the radiation exposure down to get the best diagnostic picture with the least amount of radiation.

We do.

Another point is our field is very regulated. Our machines have to be inspected once a year. This is not someone from the state coming in for an inspection this is the hospital or clinic has to pay someone to come in and make sure that the machine is giving out the correct amount of radiation. The collimators are working right. Do you really think that it would need to be inspected yearly if there was no danger to the public or to the patient if it was not working right. By the same token, if you have an untrained person taking radiographs (x-rays) and having to take them over and over that might be a little bit over exposure. With our new technology we can even take films with a lot of radiation and make them look okay. So if you have someone who does not have the right education they can "just up the technique" in other words radiation and still have a good picture every time. Unfortunately that means

more exposure to the patient.

I personally would not want my daughter or son to be x-rayed by someone that was not licensed or would not want to be in a room where there was fluoroscopy with no one with the knowledge of what that meant to the dose of radiation.

There is one more thing I would like to address. On page 47 it states"

sometimes referred to as x-ray technicians" we are not technicians.

Technologists are people who produce diagnostic medical imaging and technicians work on the machines.

Thank you for your time,

April J Baker-Padilla, R.T.(R)(ARRT)

Any Alternative or New Recommendations on This Agency:

There was several mentions about how money was taken out of the licensure and put into general funds. That money needs to stay and hire new inspectors for the several licenses that the committee stated did not get inspected in a timely matter. Doing away with licensing that protects the public does not seem effective.

If you are going to do away with the licensing which would not be conductive to the good of the public, make it where the ones with national licenses have to be nationally licensed to work including in private clinics.

My Comment Will Be Made Public: I agree