

**From:** [Sunset Advisory Commission](#)  
**To:** [Janet Wood](#)  
**Subject:** FW: Sunset Staff Review (May 2014)  
**Date:** Wednesday, June 18, 2014 4:35:06 PM

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**From:** Thompson, Ben  
**Sent:** Wednesday, June 18, 2014 3:13 PM  
**To:** Sunset Advisory Commission  
**Subject:** Sunset Staff Review (May 2014)

Dear Sunset Review Committee:

I am a licensed medical physicist (MP-0247) first licensed in 1994 to express my concern at the Sunset Staff Review published in May 2014. I don't believe the table in the review document is an adequate representation of the state, benefits, or impact of Medical Physics in Texas if licensure is removed.

The report notes four areas marked with an "x" as justification for discontinuing the program; (1) "Would deregulation would have little impact on health and safety?", (2) "Do practitioners operate in a highly regulated environment?", (3) "Is regulation also provided by another state or local regulatory program, or private sector accreditation?", and (4) "Does the program generate little regulatory activity?".

I would like to address each of the areas to provide you with additional information that is not reflected in the report.

"Would deregulation would have little impact on health and safety?" - Licensure in Texas requires ABR certification in each area of specialization.

The diagnostic and nuclear medicine licensure assures the public that those evaluating the imaging quality of diagnostic examinations have the necessary skill and training to assure equipment and processes meet the published standards. What that means is not only did the equipment pass the State mandated tests, it means every mammogram, every CT scan, every x-ray of a child, every PET scan, every cardiac study, etc. yields the best image for the radiation dose delivered. The Image Gently Image Wisely efforts could easily be in jeopardy <http://www.imagegently.org/>, as well as similar efforts for programs like Mammography Quality Standards Act (MQSA), screening CTs, etc. The unlicensed uncertified "physicist" may not have the experience or training to understand when or which element of the imaging system is underperforming. There is a real potential for a missed diagnosis because the imaging system wasn't optimal, and we only have to look back as far as the pre-MQSA days to see it. Would we take a step back to pre-MQSA days? In the present cost conscious medical community, there would be too much temptation to go with the cheapest "bidder" for a "physicist", which may not be ABR certified, may not have adequate experienced, and may not even be a medical physicist (e.g. nuclear health physicist). Without licensure, there would be no assurance the "physicist" doing the work would have the skill set to assure patients get the highest quality image at the lowest radiation dose, consistent with the needs of the ordering physician.

The radiation therapy physics licensure assures the public those physicists involved in treating cancer have the training and experience necessary to implement increasingly complex technology. I have seen ABR certified physicists replaced by new graduates without certification because they are "cheaper." Radiation oncology physics is no place for "low bid", under qualified medical physics, especially since most operate in solo positions, where mistakes are tragic and end up in the news.

“Do practitioners operate in a highly regulated environment?” - Clearly, any activity involving exposure to radiation in medical applications is regulated for adherence to equipment specification. However, physicists are not regulated by any other government entity except for those who provide services to support the MQSA. Professional licenses provide a hammer to hold over the head of physicists to keep them accountable when providing regulated services. Without licensure, how will underperforming medical physicist weeded out or at least out of Texas?

“Is regulation also provided by another state or local regulatory program, or private sector accreditation?” - I don’t think medical physicist regulation exists outside of the MQSA requirements. Licensure in Texas requires medical physicists to meet continuing education requirements that don’t exist in other jurisdictions or credentialing bodies. Without licensure, we can assume independent physicists, clinics, and hospitals will see cost savings by no longer having medical physicists require travel for CEU hours. Licensure is the regulatory hammer medical physicists sometimes have to resort to obtain the time and funding for CEU hours to keep current of new techniques, materials, tests, training, etc. The diagnostic/nuclear medicine physicist end objective is always the same, to assure the entire imaging system, from technician to imaging device to display device enhances the diagnostic or therapeutic modality. For radiation therapy, the end objective is to always deliver the appropriate treatment dose to target structures, while minimizing normal tissue dose. Without licensure, there is no hammer, and the physicist’s skill set and resulting patient care can diminish.

“Does the program generate little regulatory activity?” – This reason is the strangest. The “little regulatory activity” is because it works! You don’t stop doing something that works. Texas has been a leader in this profession, promoting common sense professional standards with licensure. Texans are assured that those not qualified are not welcome to work until they meet the requirements. Texans are assured that when they go receive services (diagnostic or therapy), those services are enhanced by people that meet a standard of competence not found in all States.

After 20 years, I pay the fees to maintain my license in Texas because I support the process, even though I left Texas three years ago, and I now work in New York. Perhaps, I will return to Texas one day. It would be cheaper for me to shout with glee at not having to pay the fee, yet be free to return at any point in the future. However, I would never be as confident in the radiological aspects of patient care, if licensure should fail. Please retain licensure, let me pay my annual bill and retain my confidence in the radiological health care in Texas.

Please contact me at:

Sincerely

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