

Vermont Secretary of State
Office of Professional Regulation
Board of Radiologic Technology
National Life Building, North, Floor 2
Montpelier, Vermont 05620-3402
Attn: Kristy Kemp, Administrative Assistant
Direct: (802) 828-2373 or Main line: (802) 828-1505
E-Mail: kkemp@sec.state.vt.us
Web site: www.vtprofessionals.org

How to Obtain Competency Endorsement for Ionizing Radiation Privileges

Title 26 V.S.A. § 2804. Competency requirements of certain licensed practitioners. Unless the requirements of subdivision 2803(1) of this title have been satisfied, no physician (see definitions) shall apply ionizing radiation to human beings for diagnostic purposes, without first having satisfied the board of his or her competency to do so. This section does not apply to radiologists who are certified or eligible for certification by the American Board of Radiology.

Go to our Web site for the full provision: <http://vtprofessionals.org/opr1/radiologists/>

Only the following licensees are eligible to obtain ionizing privileges on their medical license:

Physicians (MD) and Podiatrists (DPM) – under the Vermont Department of Health

Osteopathic (DO) and Naturopathic (ND) physicians – under the Office of Professional Regulation

To be eligible for the Competency Endorsement you must read two syllabi and view the DVD covering radiation protection and biological effects of X-Ray. You must then submit the appropriate fees and form attesting to having read the syllabi and reviewed the DVD to the Office. Upon successful completion you will be issued a Credential Certificate showing the Competency Endorsement for Ionizing Radiation Privileges.

Please follow the steps below.

1. Submit a request to the Office for the DVD covering the "Principles of X-Ray Protection" and "Biological Effects of X-Ray" along with a \$25.00 deposit fee. Your deposit fee will be refunded once the DVD has been returned to this Office. (The DVD may also be purchased for a fee of \$50 to cover future needs.) Your check should be made payable to the Vermont Secretary of State.
2. Go to the State of California's Web site to review or download the Syllabi indicated below. This information is made available through the kind assistance of and permission from the State of California. These syllabi are technical, **NOT REGULATORY**, guides. **Please ignore all references to California statutes or regulations.**

[http://www.cdph.ca.gov/pubsforms/forms/Pages/RHBCertificationForms\(HealingArts\).aspx](http://www.cdph.ca.gov/pubsforms/forms/Pages/RHBCertificationForms(HealingArts).aspx)

- [Radiography Radiation Protection Syllabus \(PDF, New Window\)](#)
Provides information on radiation protection in radiologic technology.
- [Fluoroscopy Radiation Protection syllabus \(PDF, New Window\)](#)
Provides information on radiation protection using fluoroscopic X-ray equipment.

3. Submit the completed form below attesting to your having read the Syllabi and viewed the DVD.
4. Submit the required fee of \$100.00. Your check should be payable to Vermont Secretary of State.
5. Note: This Competency Endorsement is renewable every two years, May of odd years, Fee \$110.

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Type or print. Attach additional sheets if needed.

Indicate Last Name below:	Indicate First Name below:	Middle:	Former if applicable:
Address:		City:	
State:		Zip:	
Phone:		Fax:	
E-Mail Address:			

Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female Social Security # _____ - _____ - _____.	Date of Birth (mm/dd/yyyy): ____ / ____ / ____
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**** Providing your social security number (SSN) is mandatory, and requested under the authority granted by 42 U.S.C. §405(c)(2)(C). It will be used by the Departments of Taxes, Child Support and Labor in the administration of Vermont law, to identify individuals affected by such laws. Your SSN is not disclosed as part of a public records request.*

I certify that I have viewed the DVD covering the "Principles of X-Ray Protection" and "Biological Effects of X-Ray."	Yes	No
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I certify that I have read the Syllabus covering <u>Radiography Radiation Protection</u>	Yes	No
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I certify that I have read the Syllabus covering <u>Fluoroscopy Radiation Protection</u>	Yes	No
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26 V.S.A. § 2804. COMPETENCY REQUIREMENTS OF CERTAIN LICENSED PRACTITIONERS

Unless the requirements of section 2803 (1) of this title have been satisfied, no physician, as defined in chapter 23 of this title, podiatrist, as defined in chapter 7 of this title, osteopathic physician, as defined in chapter 33 of this title, naturopathic physician, as defined in chapter 81 of this title, or chiropractor, as defined in chapter 9 of this title, shall apply ionizing radiation to human beings for diagnostic or therapeutic purposes after 1985, without first having satisfied the board of his or her competency to do so. The board shall consult with the appropriate licensing boards concerning suitable performance standards. The board shall, by rule, provide for periodic recertification of competency. A person subject to the provisions of this section shall be subject to the fees established under subdivisions 2814(4) and (5) of this title. This section does not apply to radiologists who are certified or eligible for certification by the American Board of Radiology.

EMPLOYMENT:

Name of Hospital, Clinic, etc.:					
Address:					
City; State; Zip					
Phone:		Fax:		Email:	

Statement of Applicant

I certify, under the pains and penalties of perjury, that all information I have provided in this application is true and accurate. I understand that furnishing false information may constitute unprofessional conduct and result in the denial of my application for licensure/certification/registration. (The maximum penalty for perjury is Fifteen years in prison and/or a \$10,000 fine.) (3 V.S.A. §2901)	
Signature of Applicant	Date