

MRVector

FALL 2006

Newsletter of the: American Registry of Magnetic Resonance Imaging Technologists

Phone: 718-347-8690 Fax: 718-347-8691 E-mail: ARMRIT@msn.com Web page: www.armrit.org

Oppose S.2322 & H.R.1426: Call your Senators & Representatives today!!!

Go to: http://www.senate.gov/general/contact_information/senators_cfm.cfm

In This Issue:

MRI vs. X-ray Education

RAD/Care Bills – Our Techs Speak Out

First Annual Meeting Report

CMS: Yes to ARMRIT in CA, CONN & FL

New York State Says ACR is Voluntary

UN-BIASED VIEW of EDUCATION MRI vs. X-RAY

To ARMRIT Certified MRI Technologists:

I'd like to speak to you in regard to the RadCare & Care Bills, which affects all of us. Before I go into this I would like to share my background with you.

I graduated from the Cornell Medical Center/NY Hospital School of Radiography in 1982. I am certified by the ARRT for **X-RAY**. This program was intense and I am proud to have accomplished and be certified. In 1985 I entered into the field of MRI. Before accepting my first position, I completed and passed one of the first MRI courses offered by C.W. Post College in NY. In 1994 I became involved with the RMRIT, now the ARMRIT, which I am equally as proud to have accomplished and be certified.

That being said, with expertise/experience on both sides it must be noted by **all**, that during this entire tenure and I believe up to date, that MRI was not, and is not covered at all or at least in any considerable manner in an x-ray program.

In addition to whatever you may have sent to the appropriate authorities, it must be brought to their attention that x-ray is in no way even similar to MRI. There are **NO SIMILARITIES** with the exception of possibly patient care and ethics. In order for one to be truly considered an expert in MRI, one **MUST** accomplish real training, education and/or many years of experience in MRI, and MRI only, therefore enabling them to take the certification exam.

Why is it that I had to go through so much education for x-ray? The answer is obvious, to

be an expert in this field. The same must be held for MRI technologists.

Whatever may be your background, you should have pride in what you do, pride in being a professional. What makes you this? One of the most important components is **formal** education and experience in the field you are primarily performing.

Michael P. Guida, ARMRIT/ARRT, CRA# 1615

Mount Sinai, New York

ARMRIT CERTIFIED TECHS SPEAK OUT AGAINST RAD/Care BILLS

“Are Hospitals Making It Easy For RTs to Become MRI TECHS at The Expense of the Patients?”

I just logged onto the ARRT website to verify their qualifications for Certification in MRI for RTs. What I found were **two** documents. One from 2003 that says they need at least 120 repetitions of procedures done within a certain period and it is very stringent about the requirements.⁴

The second one is a revised version from 2006 and does not make that distinction. In fact, the whole document is “dummied” down from the original version making it **EASY** for RTs to become “qualified” MRI Techs.

My question now is, “which one was sent to the Senators and Representatives to get them on their side?” This is insane. The people need to be told that they are trying to push through these unqualified RTs into MRI! This defeats the whole purpose of the CARE bills in the first place, which the ARRT organization is obviously behind.

Also, did you know that only RTs can sign off the students on procedures but some of us ARMRIT techs are actually put in the position

(cont.)

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of training them and know they are not yet qualified to do these procedures? In fact, some of them don't even know the difference between a Sagittal plane and a Coronal plane after half of their internship period?

This is proof that they are misleading the Congress and the Public. Our profession is being hijacked by bullies of the ARRT, some of whom are incompetent and have no idea how to perform MRI safely, much to the detriment of the unsuspecting public, our patients.

I was recently at a meeting called by our supervisor, who is also one of the MRI instructors, (conflict of interest?) who told us that we were supposed to, "Sign off the students on these scans even if they only watched the scans performed a few times."

I wanted to say, "according to the ARRT guidelines I've read; only ARRT certified Techs or their designees (who also must be ARRT certified), are eligible to sign the students off on their ability to perform these studies so I'm not able to do so." If I had said this aloud, fellow specialists, I could lose my job. Perhaps now is time to stand up for my rights, regardless.

I'm sorry but, complacency is not going to happen today. If we are not recognized by the ARRT then I'm sure not going to put my name on any of these student's paperwork. The reason is because they could use my signature in the future to plead their case against us and I'm not going to let that happen. I have my integrity.

These instructors aren't even following their own registry's 2006 guidelines that state, "Demonstration of clinical competence means that the program director or designee has observed the candidate performing the procedure, **and that the candidate performed the procedure independently, consistently,**

and effectively."

The truth is, **independently** they couldn't scan a phantom on their own if told which procedure to use. **Consistently**, they are being progressed through this "school" if they can scan it **once with our guidance**.

Effectively they depend on us, the experts, to guide them at every turn. Then they have the gall to say that we will be obsolete soon. This is the biggest insult!

Finally, please understand that at the hospital where I work, we have a separate magnet that is in the hospital proper (I'm in the out-patient wing) that is manned by two RTs. One of them is certified by ARRT as MRI qualified, the other is not. Guess which one is in charge? That's right, the un-certified one. This is an atrocity and against the provisions set forth in the CARE bills as well, perpetrated by ARRT themselves!

If we are good enough to be recognized as qualified to train RTs, why is ARRT against recognizing us as qualified?

I consider this whole school setup to be a violation of the ARRT ethics code and the California Postsecondary Education Commission, which I am now going to file a complaint to.

For example, in the ARRT ethics code, Part#2, 4, 5, 7, 8. They are violating their own so called rules of ethics Part B #1, 2, 5, 6, 7, 10, 16, 17, 19, 20, 21

Part C subpart iii (impersonating a candidate. If these people aren't qualified to sit for the ARRT exam, they are doing just that).

Its time to FIGHT! Get the word out! And by all means, tell the truth! Because that is what we are about!

**Mark Mickesh, ARMRIT, RA# 1710
Lakewood, California**

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MRI DOES NOT USE IONIZING RADIATION

Honorable Senator/Representatives,

This letter is to alert you with great urgency and seriousness, to the actual consequences and of the true intent, behind the possible passages of these most fraudulent and flawed bills.

As someone who has been in the Medical Imaging profession for 20 years (17 years in MRI, 3 years in X-Ray), I can expertly attest to the facts I will mention henceforth.

These pieces of legislation will **NOT** make Medical Imaging safer, more accurate, or less costly. They will actually produce the reverse consequences.

These are bills created and sponsored by a group of X-Ray technologists who are unfairly attempting to monopolize the field of medical imaging. In the guise of promoting “uniform practice and education for practitioners all across the USA”, they have appointed themselves as the **sole** organization, arbiters and authority responsible for determining who deserves the merit of being qualified and certified in **all** of the various medical imaging modalities including Magnetic Resonance Imaging (MRI).

This may be appropriate in the case of the use of X-Rays and Radiation Therapy which employ **ionizing radiation** but **NOT** when it relates to MRI or Ultrasonography.

I, like thousands of MRI Technologists who perform medical imaging employ a modality which **DOES NOT use ionizing radiation**. The pertinent and applicable training and education I have received is specific to MRI. Because our intent is only to perform MRI examinations, schooling or experience in X-Ray is irrelevant and totally unnecessary for us.

The said sponsors of these bills expect, as they do now in practice, for everyone in the MRI field to belong to the exclusive X-Ray technologist organization. This is meant to insure that only their members have an

opportunity to work in MRI thereby protecting jobs for their members and insuring higher pay due to reduced competition. This is, of course, unethical, unfair, and raises the question of unlawful discrimination.

The following is the “trench” reality of how some of the questions of competence and quality are currently being addressed. The responsible entity with the actual credentials and expertise who determines now the suitability, competence and qualifications of the technologist producing images is the **Radiologist (MD) or Reading Physician (MD)**. It is the Radiologist or Reading Physician who sees and interprets all medical images and studies. He or She is the expert, not the X-Ray technologists who are now attempting to legislate that their sole organization will be the only one to have the right to do so.

Therefore I appeal to your common sense: Realize that this responsibility should remain in the hands of the best qualified person in the medical imaging arena to make such decisions, and that person is the Radiologist or Reading Physician. Please do not leave it in the hands of anyone less qualified to determine the ability and acceptability of who performs this very challenging modality.

Another negative effect of these bills is; by removing many highly experienced MRI techs from the field now, the salaries of those chosen to remain will skyrocket. This obviously is the intended result of the professional organizations supporting these bills. By creating vast vacancies in the MRI field, it will take years for the X-Ray registry “approved” tech to gain the expertise of those forced out of the field.

This sort of legislation is a perfect example of the well-intended individuals in Washington “micromanaging” an area in which they have little or no expertise. Consider the fallacy and assumed premise that something is being done to “improve” the field by assuring only (cont.)

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“qualified” techs (belonging to the X-Ray monopoly) participate in the MRI field.

Ask yourself this simple question: What qualifies a Senator or Representative in possessing the expertise to determine the qualifications necessary to work in the field of medical imaging?

The fact that Congress was persuaded to craft such flawed legislation demonstrates this lack of expertise. Perhaps lacking sufficient information, they failed to recognize the possible exclusion of qualified individuals from practicing their chosen profession. This gross injustice needs to be corrected.

To summarize, as an expert technologist in the MRI field, I guarantee that this defective legislation **WILL NOT** make medical imaging SAFER, MORE ACCURATE, and LESS COSTLY. It will, in some cases, insure the reverse.

Please vote against this false pretense at improving the good medical care all Americans deserve.

NO!!! On S.2322 and H.R. 1426

Sincerely,

**Joseph A. Tooker, ARMRIT, RA#1387
Harbor City, California**

OPPOSE S.2322 and H.R. 1426

**WRITE YOUR LETTER TO YOUR
SENATOR & REPRESENTATIVE
TODAY!!!**

**NO to: “House Committee Passes Bill Aimed
At Improving Imaging Quality”**

RadCare Bill S.2322 and H.R. 1426.

Honorable Senator/Representative:

I am writing this letter as a MRI Technologist for the benefit of patients, their health and the furtherance and innovation of medical imaging technology!

**THESE BILLS ARE UNLAWFUL AND
ARE BIASED AGAINST MANY HIGHLY
QUALIFIED PEOPLE ALREADY**

WORKING IN THE MEDICAL IMAGING FIELD.

The technology of MRI and Radiology is totally different. MR physics is different from radiological physics. Magnetic Resonance Imaging (MRI) is based on magnetic fields and the manipulation of protons. MRI is non-ionizing and less damaging than visible light. MRI is a non-invasive diagnostic examination also for therapeutic and prognosis purposes.

The imaging quality of MRI shall be determined by a Medical Doctor / Radiologist, it is not the technologist’s responsibility. The Radiologist (MD) and physician are the only ones who can make these decisions. The obvious reason for this is their more extensive medical expertise and educational background.

Many MRI technologists are specifically certified in MRI technology! The MRI program includes cross sectional anatomy, MRI physics, MRI pathology, MRI safety, and then do your externship of at least 1,000 hours. MRI technology is a fast-growing field with new technology everyday. MRI is non-invasive and there are no ionizing radiation side-effects to patients. It is a specific subject and program. The more you know about MRI the less you know.

How can the Government determine that only radiology technologists (RT) certified by the ARRT are capable of performing MRI examinations to the exclusion of many who are already highly educated and skilled in the discipline?

The typical program for a Radiology Technologist (RT) includes radiation physics, radiology patient positioning, intro of MRI, ultrasound and nuclear medicine. It offers only a minimal exposure to MRI since their main objective is to teach X-Ray technology. The ARRT has a cross training program with minimal training and intern hours, unlike an (cont.)

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MRI technologist who must do six months of academic training and six months/1,000 hours of externship/internship.

It does not include cross sectional anatomy, MRI technology physics, and any correlations of MRI pathology.

These bills by default create a monopolized system only permitting one association of professionals to control the education and certification for MRI technologists. Please consider the possible legal ramifications of this legislation as written for; in effect they constitute what can be interpreted as a blatant violation of Fair Trade Laws including some **PRE-EXISTING ANTITRUST LAWS AND SPECIFICALLY, THE CLAYTON ACT.**

PLEASE VOTE AGAINST THESE BILLS FOR THEY HAVE FALSE PRETENSE & ARE BIASED AND UNCONSTITUTIONAL.

Sincerely,

**Nwe New Tun, ARMRIT, MBBS
RA# 1049, El Monte, California**

ARMRIT TECH = MRI SPECIALIST

Dear Honorable Senator/Representative

I strongly OPPOSE S.2322 also known as the RADCare Bill and H.R.1426 also known as the CARE Bill.

These bills are unfair and are going to lead to a monopoly and restraint of trade. I am against these bills because for all intents and purposes they exclude individuals like me who have entered the field of MRI from other than a radiology background.

Legislation like this is promoted by organizations such as the American Society of Radiological Technologist (ARRT), the American Registry of Radiologic Technologist (ASRT), and the American College Radiology (ACR) which share a board of directors and whose purpose it is to control medical imaging by excluding those individuals who have entered

the field of MRI from other than radiology based education.

The ARRT is like a Mafioso in the radiology field, if you allow this to happen there will be a lot of families affected and possibly on the welfare line. I myself am still fighting to pay back a \$40,000 school loan that I had to take out at age 44, and I'm a single mother. I never wanted to go to school to be an X-ray Technologist. I always wanted to be an MRI Technologist, and that is why I went to an MRI school. I know physics, safety, and contraindications for MRI, and I am very capable of performing MRI diagnostic studies.

The ARRT is an organization for diagnostic X-ray which has nothing to do with MRI. MRI has no ionizing radiation so why should I have to go through the ARRT to be certified. I am certified by an MRI specific certifying body, the American Registry of Magnetic Resonance Imaging Technologists (ARMRIT) just as Ultra Sound has the ARDMS and Nuclear Medicine has the NMTCB which are specialized certifying bodies.

A good analogy would be if you needed heart surgery and the government mandated only an orthopedic surgeon performs the cardiac surgery because the government favors their professional organization. This is not good practice and is unconstitutional in my view.

We are in the 21st century and we are a democracy. Let's remember we are Americans and stop the bullying and monopolizing. We all want a livelihood, **BUT let's make it fair.**

Yes, if it sounds like I'm ranting, it is because this is my only means of making an income. I am now going to be 48 and a single mother of a child who will be entering college soon. What field can I start over in and who is going to hire me if I went back to school now. I would be 50 or 52 before I finish my education or received a degree and let's face it; they are not looking to hire an older woman starting over.

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The ARRT tried to take over Nuclear Medicine and Ultrasound, but their techs fought back and now have their own registry. How can you entertain the ARRT, are you not thinking of all the people that will be hurt?

Let's think this over and consider all of the families that will be affected by these bills if they are passed. I want to keep my specific MRI certification because I am a specialist in the field. A jack of all trades in medical imaging will lead to more human error.

**MRI SPECIALIST IS THE WAY TO GO
ARMRIT FOR MRI.**

Sincerely,

**Constance Felice, ARMRIT, RA# 1497
Brooklyn, New York**

**COMING SOON - ARMRIT
ANNUAL MEETING & SEMINAR
- OCTOBER 2007 VISIT
WWW.ARMRIT.ORG FOR
DETAILS**

**THE ARMRIT 2006 FIRST ANNUAL
MEETING & SEMINAR WAS A GREAT
SUCCESS!!!**

The first annual meeting of The American Registry of MRI Technologists was held at the White House, in Las Vegas, Nevada on August 25 -27, 2006. The 12-hour, two day meeting was by all indices, topics covered, relevance to the MRI tech practice, attendance and venue used, voted it a success. Based on the feedback critique by the registrants, the overall meeting was deemed excellent by 90% and very good by the rest of the registrants. Commentaries included "it was more than they expected," "learned a lot from the meeting," "looking forward to next year," " will definitely be there

next year," "were happy that physician users of MRI," were actually speakers at the meeting.

The registrants hailed from across the country, predominantly the west and east coasts as well as from North Carolina, South Carolina, Texas and Virginia. A welcome reception dinner was held on Friday, August 25 at one of the local restaurants and the meeting opened promptly at 8:00 a.m. the following day. Buffet breakfast and lunch were served during the two day meeting at the venue, to expedite continuum of the meeting. The meeting concluded on Sunday August 27.

The roster of speakers included Albert D. Cayton, MD, attending surgeon, and former President of The Brooklyn Hospital Center Professional staff, who has an extensive surgical practice and experience. He opened the first day with the topic of *MRI Applications in Surgical Practice*. He emphasized the clinical contribution of MRI in his surgical practice as well as the vital role of the technologist in these clinical applications. He went into specific indications of MRI in his practice.

The second speaker was Francis Collini MD, Associate Clinical Professor in Medicine and Attending in Internal Medicine and its vital role in working up patients. He underscored the extended role, to the delight of the attendees, of the MRI technologist in patient care. In effect he indicated that when he refers a patient for an MRI study, the technologist of that facility is in fact an extension of his practice and therefore he/she represents the physician. The attendees appreciated this role being pointed out in an open conference and agreed. It is evident that how patients are treated and managed during the study redounds back to the referring physician.

Bradley Newcomer, Ph.D.
Associate Professor at University of Alabama at Birmingham MRI program covered the vast
(cont.)

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subject of the different technical aspects of MRI. His topics which covered a marathon 4-hour lecture included both basics and specific MRI technology. These included image quality parameters and physics. Dr. Newcomer who has prodigious experience in teaching MRI technology, radiation therapy, and nuclear medicine physics to residents in radiology and medical students as well as imaging technologists and therefore fell very much at home at home in his topics and their delivery.

Adeel Abbas, MS, ARMRIT, the MRI manager at Bellevue/NYU Hospital, New York, spoke on various paths available to MRI technologists once they reach a more senior level and wish to pursue related careers in the health field area. Already he was asked by some of the attendees to repeat and perhaps expand the topic some more for next year.

Wilfrido M. Sy, MD, executive director of the Registry introduced the speakers and was largely the moderator of the meeting while James Coffin President of the Registry gave the official welcome and addressed some political aspects and issues that confront the Registry. He emphasized the importance of member participation in issues that are vital to the Registry. He detailed that unless their voice is heard, they might as well be taken as non-existent.

This being an inaugural meeting some shirts and other souvenirs were made available to the registrants including a signed copy of the book titled "Feng Shui, Craps and Superstitions." One registrant commented that the book was indeed very appropriate for the place of venue.

Plans for next year's annual meeting are already underway. It will be held in Las Vegas with the tentative dates for the first weekend of October 2007.

**Wilfrido M. Sy, MD, Executive Director
ARMRIT, New York, New York**

CENTER FOR MEDICARE & MEDICAID SERVICES – CMS OF FLORIDA, CONNECTICUT & CALIFORNIA INCLUDE ARMRIT

The Center for Medicare and Medicaid Services (CMS) of Florida and Connecticut's "Medicare Guidelines for Independent Diagnostic Testing Facilities" have included ARMRIT Certification in their credentialing requirements for nonphysician personnel stating: "The personnel performing the tests identified under the HCPCS Codes section must have the applicable certification/licensing as listed below:

The American Registry of Magnetic Resonance Imaging Technologists (ARMRIT) certifies that individuals who successfully complete the ARMRIT Examination for MRI are qualified/competent Registered MRI Technologists. Once credentialing is obtained, a general license is obtained from the Florida/Connecticut State Board."

The State of California CMS Non-Physician Qualifications: State Certification/Licensure in Diagnostic Radiologic Technology, and Certification in Magnetic Resonance Imaging (MRI) by the ARRT with current Registration or by the **American Registry of MRI Technologists (ARMRIT)**.

These developments are very positive and not by accident. The Registry's Certified Techs throughout the nation have been researching and providing information to ARMRIT headquarters in NY. The provided information is: State requirements for MRI, if any, which relevant government agency or department, and Official or Committee that reviews documentation.

Once the above information is received, an introduction letter and supporting documentation is sent to the Official or Committee for review.

You can help by researching your State's (cont.)

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requirements for MRI, if any, and finding out what agency, department, committee and/or individual the ARMRIT should contact to submit our documentation. Forward information via e-mail to: ARMRIT@msn.com or Mail to: ARMRIT 8815 Commonwealth Blvd. Bellerose, NY 11426.

Regards,
James F. Coffin, ARMRIT
President

NEW YORK STATE SAYS ACR IS VOLUNTARY

In a response to a letter from one of our New York ARMRIT Certified MRI Techs, an official from the New York State Bureau of Environmental Radiation Protection answered:

“It is our office which licenses radiologic technologists in New York State. At the present time, there is no licensure or regulation of MRI facilities other than that which occurs in Article 28 facilities, which are primarily hospitals. Most of the facilities that offer MRI that I am aware of have sought **Accreditation from the American College of Radiology (ACR) but that is of course voluntary.**”

ARMRIT CERTIFIED MRI TECHS ON-LINE AT: **www.armrit.org**

All Certified Registry Active MRI Techs are required to post their resume (CV) on the ARMRIT Webpage at www.armrit.org:

- 1) Click on ‘**Certified MRI Techs**’ at the bottom of the homepage.
- 2) Scroll down to the bottom of the list and click on: ‘**Click here to post your Resume (CV)**’.
- 3) Enter your Login: use your e-mail address.
- 4) Enter a password.
- 5) Enter all relevant information and click on **Submit**.
- 6) Remember your **Listing Number and Password**.

Your cooperation is greatly appreciated.
ARMRIT Board of Directors