

Southern Oregon SPINE CARE

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Re: SB 128 Support testimony

Committee members and medical professionals on both sides of SB 128, we can all agree that expansion of medical scopes of practice have been ongoing for decades. I would argue that for the most part, this has been a positive for the members of our communities.

Senate Bill 128 is no different.

I present today, my argument in favor of passing this bill, but I also request there be careful consideration of the requirements placed on Advanced Practice Nurses (APN's) who apply to supervise a licensed radiology technician during fluoroscopic (fluoro) procedures. As a reminder, we are independently licensed in Oregon to work without the requirement of a supervising physician.

After reviewing requirements of Oregon Administrative Rule 333-106-0205, affording Physician's Assistants (PA's) the ability to operate a fluoroscope during procedures, it became very clear very quickly, that we were not requesting the same operating privileges. PA's are required to pass the American Registry of Radiologic Technologists (ARRT) examination in order to operate the fluoroscope during procedures. In addition to this requirement, they are required to operate the machine only with their supervising physician in the room. Having worked in surgery for the past twenty years in multiple capacities, I can see how this would be valuable. There are times in surgery, where time is of the essence, where life or limb are on the line and getting a quick image is of paramount importance.

We are not asking for the same privileges. What we are asking for, is for properly trained Advanced Practice Nurses to be able to supervise independently licensed Radiologic Technologists without having to rely on a MD / DO to supervise.

Not to berate this further, I will get to the main points of my argument in favor, as well as my recommendations for consideration to the committees involved.

1. It is well established that we need radiation safety training across all specialties.
 - a. From the research I have done, there is no standard of training for MDs, DOs, DVMs or DPMs regarding fluoro safety during training that is any different than what APRNs go through during training.

- i. There is an article in the Journal of Applied Clinical Medical Physics dated 1 Jan 2000, which states, “The Accreditation Council for Graduate Medical Education (ACGME) establishes Institutional and Program Requirements to insure that resident physicians are appropriately trained to perform clinical procedures with technical proficiency. The program requirements ‘specify essential educational content, instructional activities, responsibilities for patient care and supervision, and the necessary facilities of accredited programs in a particular specialty.’ However, the current program requirements of the ACGME for most specialties that use fluoroscopy **do not specifically mandate that resident physicians learn about radiation management in fluoroscopic procedures. Therefore, credentialing these physicians as technically competent gives no assurances that they have received training in the safe uses of fluoroscopy.** Untrained practitioners logically should not be granted ‘rubber stamp’ privileges to perform fluoroscopic procedures.”
 - ii. There are examples of Certified Registered Nurse Anesthetists (CRNAs), who are highly trained in interventional diagnostic and therapeutic procedures who have been unable to pursue their own practices in the state of Oregon due to the restrictive fluoroscopic regulations, when they may have in fact undergone the same training as their physician counterparts.
 1. Is it acceptable that we have highly trained specialists leave the state because they are unable to treat patients in need without becoming criminals themselves?
 2. Do the letters behind your name dictate your competence or ability to care for our citizens?
 3. This scenario is real and places even more burden on other providers and practices, that can further delay treatment to Oregonians in need of specialized care.
2. In Oregon, there are currently three options for Non-Radiologist Practitioners to prove their competency to operate ([333-106-0205\(2\)-\(4\)](tel:333-106-0205)) a fluoroscope, which once again, we are not asking for. Approved training resources include:
 - a. ASRT Online CME Course
 - b. Fluoroscopic Safety, LLC Online Course
 - c. R.M. Partnership Online & Softbound text Course
 3. If, however you are a Physician’s Assistant, you must also complete the ARRT exam.
 - a. I would argue that many PA’s have undergone much radiation safety training throughout their studies, as they are directly tied to a physician who is responsible for their training, performance, professionalism and patient outcomes.
 - b. I must then ask, why are PA’s held to a higher standard than MD’s, DO’s, etc, where there is no formal documentation required other than the above stated courses to “operate fluoroscopic equipment”?
 - c. Is the Oregon Board of Medical Imaging intentionally placing road-blocks on those who are not physicians, according to Oregon Revised Statute 677.085, even though

the APRN or PA may have had equal or even more training regarding radiation safety than an entry level physician?

- d. Given that the Physicians Assistants have agreed to take the ARRT exam, I am not compelled to discuss this further.
4. As Advanced Practice Nurses, we are held to the same standards of care as our MD / DO counterparts in treating patients. If we are treating hypertension or diabetes, we are expected and required to follow the same guidelines as a treating physician. The same should hold true with fluoro training. In fact, if I were to argue the point, I think it would be fair to request operating privileges without taking the ARRT examination, assuming we have met the same requirements as our physician counterparts. Given the nature of this bill however, I will withhold that argument.
5. Allowing APNs to supervise licensed radiography technologists would expand care available to Oregon citizens in underserved areas of our great state.

Thank you for considering my position. My hope is that we can provide better healthcare for all Oregonians as we move to the future.

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