



STORIES

OF QUALITY PATIENT CARE

NOMINATE A
GOLD
STANDARD
REGISTERED TECHNOLOGIST

Learn more on pages 16–17



THE AMERICAN REGISTRY
OF RADIOLOGIC
TECHNOLOGISTS®





THE GOLD
STANDARD
IN PATIENT
CARE



The aspirations of Registered Technologists can be summed up in the wise words of a woman with six decades of experience: Patients are counting on you to get it right. The remarkable career of Jo Picone, R.T.(R)(ARRT), (page 12-15) illustrates this simple truth.

We have so much to learn from each other. That is why we have again carefully gathered the insights of R.T.s like Jo. From coast to coast, we have heard from passionate leaders whose natural sense of competitiveness is rooted in the conviction that patients deserve the very best in safety, care and services. One professional described this drive — the pursuit of CEs, certifications and networking — as a “promise you should uphold for every patient you meet.”

In a challenging health care field that demands constant expansion of knowledge and skills, you can count on The American Registry of Radiologic Technologists to raise the bar high and, with certification and registration, prove that you are doing your very best to get it right — every time.

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FIRST TO COMPLETE NEW CQR PROCESS

They say it's easy, fast and valuable.



“IF YOU
WANT TO BE
COMPETITIVE,
THIS WILL
HELP.”



ALEJANDRO RAMIREZ

R.R.A., R.T. (R)(CT)(MRI)(ARRT)

Easy. Very easy. No need to procrastinate. These are reassuring words to hear when learning about the experience of the first-ever group of radiologic professionals to complete the new continuing qualification requirements (CQR).

Cindy Petree, R.R.A., R.T.(R)(CV)(ARRT), and Alejandro Ramirez, R.R.A, R.T. (R)(CT)(MRI)(ARRT), were among the pioneering R.T.s required to fulfill CQR because they are Registered Radiologist Assistants, whose CQR compliance began in 2013. Other R.T.s won't start work on their CQRs for at least two years.

“I received the information packet and thought there was no need to procrastinate,” says Petree. “The first step was setting up the professional profile. That took about 30 to 40 minutes. Then I set up the structured

self-assessment. The instructions said to allow about four hours, but it only took 40 minutes.”

In her case, her assessment did not indicate gaps in her knowledge base. If it had, she says she would have embraced the opportunity to learn. “I don't think you should ever be offended when you find out you need more education,” Petree says.

“Anyone in patient care should always strive to do better for a patient and better for an employer, and we should expect that for ourselves.”

CQR is an exciting, but sometimes misunderstood, new element in professional development for R.T.s.

Petree and Ramirez understand that some R.T.s may be concerned with this new requirement.

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Ramirez says, beyond the ease of completing the CQR, the process has lasting value. He compares the professional profile to a LinkedIn page — a one-stop shop to see all of his educational and professional achievements and compare them with others in his field.

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CINDY PETREE

R.R.A., R.T.(R)(CV)(ARRT)

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The CQR profile provides optional links for sources of clinical refreshers and articles targeted to your specific work.

“I see it as your professional guide or coach. It gives you a good view of where gaps may exist in your knowledge or experience, compared to others,” Ramirez says.

“If you want to be competitive, this will help. But it’s really about patient safety, care and services.”

Petree and Ramirez understand that some R.T.s may be concerned with this new requirement.

“I think people probably don’t get it,” says Petree. “They are scared that it’s a test that they can fail.”

Perhaps the only way to fail is not giving yourself enough time to identify and fill in any educational gaps. Upon completing his self-assessment, Ramirez found he would benefit from three CE units in a specific area. His online CQR resources guided him to suggestions and links to CE activities in that area. He completed the CEs, returned to his profile, submitted an update and he was done.

“Once you get the notice, start the process. Don’t procrastinate,” says Petree. “You’ll have three years to complete it, but you don’t want to be the person taking the assessment two weeks before the deadline, then find out you need 15 CE units to comply. Know where you stand right away.”

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SOME KEY POINTS

All primary and post-primary certifications and registrations earned on or after January 1, 2011, are time-limited to 10 years. Three years before the end of the 10-year limit, the R.T. can begin work on a three-part process:



An online exercise that provides the R.T. with a professional profile.



A self-assessment designed to evaluate strengths and weaknesses in knowledge and skills.



Targeted continuing education to address any gaps indicated by the assessment.

The R.T. has three years to comply with CQR. For example, an R.T. who earned certification and registration in 2011 can begin work toward compliance in 2018, allowing three years to complete the professional profile, self-assessment and targeted continuing education by 2021. Any CQR CE identified and completed will count toward biennial CE.



JERILYN POWELL

MSAS, R.T.(R)(S)(ARRT), RDMS(AB), RVT(VT)

FROM CLINIC TO CLASSROOM

*It's clear to this
ARRT staff member:
Continuing
education is
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A go-getter from her rodeo days growing up in Wyoming, Jerilyn ("J.J.") Powell, MSAS, R.T.(R)(S) (ARRT), RDMS(AB), RVT(VT), has a career path that spans from clinical work to program director to CE provider to, now, ARRT staff member.

When she talks about the purpose of continuing education, the message is pretty straightforward: "It is the fulfillment of the promise you should uphold for every patient you meet."

Powell is an exam development coordinator at ARRT's offices in St. Paul, Minn. Her work often involves facilitating a discussion by board-appointed committee members around a table. Their efforts lead to high-quality exams for the trio

of general, vascular, and breast sonography credentials that Powell focuses on.

She also continues to teach whenever ARRT sends her as a presenter at conferences, including the national conference for the Society of Diagnostic Medical Sonography.

This type of multitasking is hardly new to Powell. In college, she not only served as the student athletic trainer for multiple sports teams, but she also drove the softball team's bus.

Her early experience in athletic training put a sharp focus on her career path. As a sophomore in high school, she toured hospital radiology departments and decided on a four-year college path.

Her four-year degree led to a masters degree. Her x ray certification led to a sonography certification. And her educational roles led to a program director position in a hospital-based program.

It wasn't until she started volunteering as an ARRT exam item writer that she considered the psychology of a test in terms of how she was teaching and evaluating her students. The experience improved her skills as an instructor, she says.

ARRT's quality process and focus on protecting the patient continues to motivate Powell.

*"You don't just get
your certification
and registration and
then stop," she says.*

"There is still a lot to do," she says. "These exams we develop are for rapidly changing technology. We can always make it better and more relevant to what entry-level technologists will be doing."

In fact, from her vantage point at ARRT, she can look at the information collected by ARRT surveys. The surveys report the clinical practices performed by the majority of R.T.s in a specific discipline. And what she sees is change — rapid, consistent change. This presents an exciting challenge to all R.T.s, she says.

"You don't just get your certification and registration and then stop," she says. "You can give so much more to the patient by being informed. Every CE will make a difference down the line to a patient."



DUY TRAN

B.S., R.T.(N)(ARRT), CNMT, NMTCB(CT)

NEW ARRT GRANT PROGRAM

Fuels pursuit of excellence in a changing world.



MONICA HAHN B.S., R.T.(T)(ARRT)

From opposite coasts, a nuclear medicine technologist and a radiation therapist share common ground when it comes to pursuing their goals. Both received \$500 grants this year from a new ARRT-funded program that, together with state societies, supports technologists in being the best they can be — for their profession and, most importantly, for their patients.

On the East Coast, Duy Tran, B.S., R.T.(N)(ARRT), CNMT, NMTCB(CT), is with the Inspira Medical Center in Woodbury, N.J. He applied for an ARRT grant specifically to achieve a CT certification, which the state of New Jersey requires before he can perform fusion imaging. Prior to that certification, he had to find a CT-certified colleague to complete the patient's exam.

"It's an expensive course," says Tran. "I was grateful and humbled to receive this grant."

Tran left a refugee camp in Malaysia, arriving with his family in the U.S. at age 2. His parents didn't speak English, so Tran worked extra hard to navigate school. As a result, education is paramount to his approach to work and life. One day, he'd like to be a professor.

As he continues to pursue his goals of additional credentials and higher education, he remains a firm believer in the value of certification and registration.

"Rules and regulations are constantly changing in health care," he says. "A credential acts like a standardization of knowledge. And CEs keep you on top of a changing world."

"I was grateful and humbled to receive this grant," says Tran.

On the West Coast, Monica Hahn, B.S., R.T.(T)(ARRT), is with the radiation oncology department at the Kaiser Permanente Interstate Radiation Oncology Clinic in North Portland, Ore. Building on 10 years of experience in her much-loved field, she is using her grant to fund continuing education to maintain her ARRT credentials as she begins studies toward a masters of business administration degree in health care administration.

"Not many people know about radiation therapy," Hahn says. "It's a career that balances higher technical jobs, like operating multi-million dollar machines, with the understanding that, at the end of the day, you're holding hands and talking with a patient. It takes humility and compassion with a strong technical component in a rapidly progressing area of medicine."



JOSEPHINE PICONE R.T.(R)(ARRT)

LEARNING, LOVE AND LONGEVITY

Six decades into her career, Josephine Picone continues to set the bar high for her profession.

When Josephine Picone, R.T.(R) (ARRT), of Hartford, Conn., reports for her weekly shift at the outpatient center at Saint Francis Hospital and Medical Center, she brings with her a tool few possess — 63 years of professional experience.

Early in her career, she knew to arrive early to mix barium if any would be required for the day's work. She definitely processed a lot of film in wet solution and carefully ensured they didn't stick together, because she knew they wouldn't come apart — and no patient wants to repeat exams, especially a barium enema. Once her films were dry, she clipped

the corners and ran them down to the appropriate department.

"I'm so lucky to have seen so much," says Picone, 86.

Once called the "white tornado" by co-workers for her efficient pace in her white uniform, Picone's passion for this career started at age 17 when she graduated from high school and enrolled in Massachusetts School of Physical Therapy and Medical Technology. She performed her clinicals at Beth Israel and Massachusetts General in Boston. She earned her ARRT credential in 1952.

In Boston, Picone became involved with the Massachusetts Society of Radiologic Technologists, helping organize events and relishing the opportunities to learn from some of the brightest innovators in her rapidly changing profession.

Her career soared. She was soon the senior technologist at Marlboro Hospital and later chief technologist at Boston State Hospital, where she fell in love with social worker Angelo Picone.

The couple married and moved to Connecticut, where Angelo worked in the Hartford school system. Early motherhood brought new adventures at work, with fellow female technologists covering symptoms of morning sickness for each other. In those days, if you were pregnant, you didn't work in this field, she says. A language of winks and nods between female co-workers got them through bouts of nausea.

When her six children were little, she was at home with them, serving as PTA officer and Little League Auxiliary president and running a full slate of kids' activities. But she filled in shifts at Saint Francis Hospital and Medical Center in Hartford when she could — and always kept up with her continuing education requirements and the activities of the Connecticut Society of Radiologic Technologists.

"I loved every lecture and event. I met so many wonderful people in x ray. It was always interesting," she says.

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'IT WAS ALWAYS INTERESTING

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Her credentials and up-to-date knowledge were her saving grace when Angelo passed away in 1982, after an illness. Their youngest was just 12. Picone was determined to keep her kids in their Catholic schools — college, high school and middle school. So she dove head first into her beloved profession.

“I worked 60-hour weeks in the emergency department — and I loved it,” she says.

Her kids delivered pizza and drove taxi and, together, they made their new life work. The day’s task list was set with a magnet on the refrigerator door. Picone remembers one of her kids asking “Is this house ever going to be normal?” She answered “Probably not, but it’s normal for us.”

She supported all of the kids’ sports, but football wasn’t allowed. In her work, she’d seen three children paralyzed by the sport.

Her energy, education and passion for service supported her family and shaped her approach to patient care. Looking back on the rapid evolution of her field, which consisted only of x ray before the 1960s, she firmly believes that the greatest advancement is “speed.” The old films were beautiful, she says, but slow. Digital imagery meant patients could have answers much more quickly. With a click of a few buttons now, for example, she can send images to three departments.

That compassion for the patient’s safety and anxiety has been a hallmark of her career. “You have to become acquainted with patients,” she says. “They are hurting. Understand how much they hurt. And be professional. They are counting on you to get it right the first time. The radiologist can only read what you give them.”

In her many years in the emergency department, she saw more than her share of stabbing, shooting and accident victims. And she was happy to be able to help them.

While the span of her career has included the arrival of CT, MRI, ultrasound and many other advancements, she says one thing has not changed: “The patient. They are all worried. That will never change. I like to talk to them and try to relieve their worries.”

Her dedication to local society involvement and her hunger for learning the next new thing continues today.

“If this is your field, you go to every CE and event out there,” she says. “Don’t limit yourself to your comfort zone.”

Her thousands of patients over the years have benefited from her endless drive, as have her kids.



NG'

Her brood now consists of a Ph.D. in biotechnology, a negotiator at a utility company, a senior radiation dosimetrist, a human resource professional at the American School for the Blind and a licensed social worker. One granddaughter has a doctor of pharmacy degree and another is working on her doctor of physical therapy degree.

“We set the bar high,” she says, a lesson she learned from her parents, both Italian immigrants who ran a successful auto garage. Picone said she and her brother, together a high school cheerleader and football captain, would eagerly get up at 6 a.m. to simonize cars before heading off to school and a game.

“Although I do not have any extra letters along with the R.T.(R), both my husband and I were big on education,” she says. “He had three degrees and he had every intent that the children go on.”

A look at what a hard-pressing 63-year career can accomplish

At the 2015 fall conference of the Connecticut Society of Radiologic Technologists, the organization’s lifetime achievement award was officially renamed “The Josephine M. Picone Lifetime Achievement Award,” in acknowledgment of Picone’s significant impact on the profession of radiologic technology. That impact is seen in her:



Advocacy in Washington, D.C., for the federal Consistency, Accuracy, Responsibility and Excellence in Medical Imaging and Radiation Therapy bill.



Service on the legislative committee of the Connecticut Society of Radiologic Technologists, which successfully fought for Connecticut’s first licensure bill that passed in 1993.



Thirty-three years of work in the emergency department at St. Francis Hospital and Medical Center in Hartford, Conn.



Many years facilitating “Let’s Not Meet by Accident,” an educational program that St. Francis Hospital hosts for new automobile drivers in the community.

I AM THE
G  **LD**
STANDARD



RECOGNIZING THOSE WHO GO ABOVE AND BEYOND

Individuals who consistently demonstrate excellence in both work and service span the spectrum of professions. From humanitarian organizations to health care and entertainment, people are recognized for their positive contributions. Recognition awards are an opportunity for their peers to come together and nominate those who go above and beyond. While all nominees exemplify the best within their profession, only a few receive the award.

It is much the same in our own profession with the creation of *I Am the Gold Standard* recognition. The stakes we deal with every day are high, with the daily rewards of helping and healing personally and professionally satisfying. *I Am the Gold Standard* provides a unique opportunity to spotlight R.T.s who in various ways demonstrate an exceptional passion and commitment for their profession and their patients.

“I Am the Gold Standard is all about recognizing those R.T.s who represent the best in our profession,” says Kevin L. Rush, MHA, R.T.(R)(T)(ARRT), FASRT, senior director of credentialing operations. “Someone who is actively involved in advancing their career and our profession.”

Recognition and more







R.T.s selected for *I Am the Gold Standard* recognition will receive air, hotel and conference registration for a national society conference (continental United States) of their choice. They will also have an opportunity to be featured in ARRT’s and others’ publications to celebrate the value of our profession.

‘I Am the Gold Standard’ starts with you.

I Am the Gold Standard is a unique opportunity to call out certified and registered R.T.s who represent the best of the best. Anyone can nominate themselves or another R.T. to be considered for *Gold Standard* designation. Nominees should demonstrate consistent performance that goes above and beyond our usual stringent standards.

To be considered for *I Am the Gold Standard*, the nominee must maintain current ARRT certification and registration and not have been previously recognized by another national mechanism — *I Am the Gold Standard* is designed to spotlight hands-on clinical caregivers having made well-above average contributions.

Nominees will be recognized for going above and beyond in any of the following ways:

-  Making a positive difference in quality patient care through application of biennial continuing education
-  Volunteering to generate a positive impact for the profession (career day at schools, societies, etc.)
-  Participating in meaningful research on behalf of the profession
-  Leading quality improvement or other departmental/organizational initiatives
-  Routinely receiving stellar patient feedback via the hospital or clinic’s patient experience program
-  Consistently demonstrating the employer’s values and expectations

Are you inspired, engaged, involved above and beyond expectations?

Nominate yourself or someone else by April 30, 2016.

Go to IAmTheGoldStandard.com. You’ll find a simple form to complete and submit.

NEWS ROUND-UP

FOR 2016–17

Structured Education Post-Primary Requirement Relaxed

A structured education requirement for post-primary credentials that was announced six years ago to become effective in 2016 didn't provide quite enough lead time for either educational providers or ARRT to gear up for the new system. So in the interest of taking enough time to get it right, the requirement is relaxed for those seeking a post-primary credential in the next couple of years.

An interim requirement — effective between now and January 1, 2018 — will permit post-primary candidates to report structured education related to the discipline. The stricter original criterion, which required earning at least one credit from each of an exam's major categories, will become effective January 1, 2018, rather than the January 1, 2016, date originally planned.

To learn more about the structured education post-primary requirement and the 2016–17 interim plan, visit ARRT's website.

COMING IN 2017

Report Ethics Violations Within 30 Days

Reporting ethics violations has been an annual event that coincided with an individual's renewal. Not after 2016 though. The schedule is being tightened to permit more timely action.

Beginning January 1, 2017, R.T.s will be required to notify ARRT of any potential ethics violations within 30 days of its occurrence or during their annual renewal — whichever comes first.

It all goes back to ARRT's mission of promoting high standards of patient care. That calls for prompt reporting of potential violations, which enables an ARRT investigation right out of the gate. In most cases, there is no violation and life goes on as usual.

But what qualifies as a potential violation that requires reporting? Any state licensing issues or criminal charges or convictions — as well as, of course, any other violation of ARRT's Rules of Ethics. For more information on how to report, visit www.arrt.org.



Certified and registered in 1952, Josephine Picone's pin bears The American Registry of Radiologic Technologists' original name — The American Society of X Ray Technicians.

COMING IN 2018

Educational Prep, Not Resulting Credential, Will Earn CE

Direct documentation, rather than indirect evidence, will qualify for continuing education under a new policy beginning January 1, 2018. This means a change in how you accrue CE credits when you pursue a new credential.

True, for your next biennium, you probably won't be allowed to report newly earned credentials to meet future CE requirements. But you will be able to report the educational activities you completed to qualify for the new credential.

In recent years, about 2.5 percent of the R.T.s reporting CE took the new credential route.

The policy change, effective January 1, 2018, advances the board's CE philosophy to recognize that it is the learning itself, and not the resulting credential, that was the educational experience.

Certification and Registration: You Can't Have One Without the Other

You've heard the old song about "Love and marriage; they go together like a horse and carriage," right? So, too, do "certification and registration" go together. In fact, neither can actually stand alone without the other.

Here and there in recent months, you may have noticed the two terms used together rather than alone. It simplifies things.

Individuals who had been identifying themselves as "ARRT-certified" without maintaining the credential's annual registration weren't actually qualified to claim ARRT affiliation. Again, that's because one doesn't really exist without the other.

So, you're either certified and registered, or you're not.

Unlike an academic degree, the R.T. credential can only be used if it's maintained through annual renewal of the agreement to comply with the *Standards of Ethics*, reporting CE activities every other year, and — for those earning the credential since 2011 — demonstrating continuing qualifications.



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