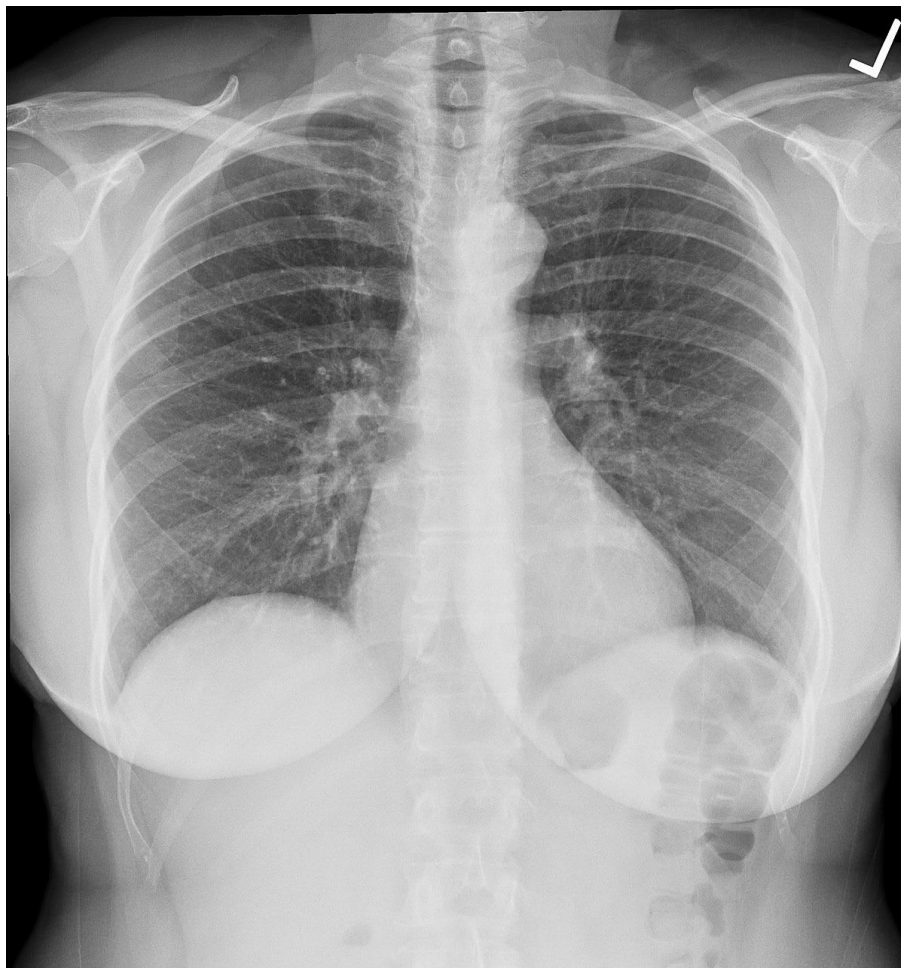




FLORIDA DEPARTMENT OF HEALTH
BUREAU OF RADIATION CONTROL

GENERAL GUIDELINES AND REQUIREMENTS
FOR PROVIDERS OF RADIOLOGIC TECHNOLOGY
CONTINUING EDUCATION



GENERAL GUIDELINES AND REQUIREMENTS
FOR CONTINUING EDUCATION
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I. GENERAL INFORMATION

This document contains guidelines and requirements for those who provide continuing education to Florida's technology professionals.

64E-3.009 <https://www.flrules.org/gateway/ChapterHome.asp?Chapter=64E-3>

II. LEGAL AUTHORITY

Chapter 468, Part IV, Florida Statutes, (FS) and Chapter 64E-3, Florida Administrative Code, (FAC) provides that persons possessing certification in Radiologic Technology must earn twelve (12) hours of continuing-education credits by the expiration date on their certificate (completed during their biennium) to renew. See 64E-3.008 – 64E-3.010, FAC, in particular.

III. GOAL

The goal of continuing education is to enhance the technical skills and expertise of individuals by suggesting information and methods that will reduce unnecessary and unproductive ionizing radiation exposures.

IV. SUBJECT MATTER

The content of each course shall be planned in a logical order and reflect input from qualified persons in the subject matter. Appropriate subject matter for continuing education courses shall reflect the professional education needs for the learner to meet the healthcare need of the consumer. Learning experiences and teaching methods must be appropriate to achieve the objectives. The time allotted for each activity must be sufficient for the learner to meet the objectives.

The subject matter presented in a continuing education course must fall in one of two categories: technical or personal development.

Under the technical category, the program may cover any technical aspect of radiologic technology: radiography, nuclear medicine, or radiation therapy. Course topics may include but are not limited to the following:

- Digital radiography;
- Operation of diagnostic and therapeutic equipment;
- Radiographic positioning;
- Image processing;
- Shielding and collimation;
- Computed tomography (CT);
- Radiation therapy, including but not limited to, linear accelerators, high-dose rate afterloaders and gamma knife units;
- Radiographic screens;
- Bone densitometry;
- Portable or mobile radiography;

Contrast media studies;
Implant therapy;
Ultrasound;
Magnetic resonance imaging;
Angiography;
Cardiac catheterization;
Nuclear medicine, including but not limited to, Positron Emission Tomography/Computed Tomography (PET/CT), and
Single Photon Emission Computed Tomography (SPECT);
Radiation oncology;
Mammography;
Radiologic technology education;
Chapter 468, Part IV, F.S.;
Chapter 64E-3, F.A.C.;
Chapter 404, F.S.;
Chapter 64E-5, F.A.C.;
Biological or physical sciences, such as radiation physics or radiation biology;
Management or administration of radiologic health care personnel, such as radiation protection and safety and dosimetry.

Under the personal development category, the program may cover any topics that enhances the technologist's skills and improves patient care. However, awards presentations, introductions of new staff members, tributes to departing staff, employee satisfaction surveys, discussions of facility fiscal status or human resource policies, or similar topics will not be approved for personal development. A maximum of three hours of continuing education in this category may be used during each renewal cycle. A list of suggested course topics is:

Patient care,
Nursing,
Stress Management,
Legal Issues,
Time Management,
CPR,
HIV/AIDS education
Psychology,
Medical Economics, and
Communication.

Attendance at the entire course is required for credit.

The following meets the one-hour HIV/AIDS update requirement: Florida's Omnibus AIDS Act: A Brief Legal Guide for Health Care: Professionals [http://www.floridahealth.gov/diseases-and-conditions/aids/administration/ documents/Omnibus-booklet-update-2013.pdf](http://www.floridahealth.gov/diseases-and-conditions/aids/administration/documents/Omnibus-booklet-update-2013.pdf)

V. CONTINUING EDUCATION STANDARDS

1. EXCESSIVE HOURS

Technologists who complete more than twelve hours of continuing education during their renewal cycle may not carry hours over to the next renewal cycle. Only continuing education earned in your current biennium will show online under the CE tab of the license verification system (<http://www.flhealthsource.gov/>).

2. COURSE CREDIT

A technologist cannot repeat the same course during a biennial renewal cycle.

3. LENGTH OF COURSE

All courses shall be at least 30 minutes in length and will be awarded one-half (.5) contact hour of continuing education credit. An additional one-quarter (.25) contact hour of continuing education credit will be awarded for each additional 15 minutes of course length.

4. TYPES OF COURSES

Live Presentation

The Bureau of Radiation Control must approve all live presentations. Form DH 374, "CE Provider Information Sheet" must be completed and a course outline and description of course objectives must be submitted. The presentation date on the roster for a live course should reflect the last date of credit awarded. For example: if the course was presented January 6 through January 9 the presentation date would be January 9.

Satellite programs

On occasion, companies provide satellite presentations to all the hospitals that use their equipment, supplies, or services. The sponsor of the program should submit the course for approval. A moderator will need to be assigned to each facility to monitor attendance and assure completion of the program for certificate holders to receive credit.

Self-study programs

The Bureau of Radiation Control must approve all self-study programs. Form DH 374 must be completed, and a copy of the entire program materials must be submitted. All the submitted educational material will be retained in our files and will not be returned.

Textbook/E-Book/Electronic media

All textbooks/E-Books/DVD/CDs courses must be submitted for approval, including electronic media made of live presentations. If the submitted textbook/electronic media is not developed or copyrighted by the provider, a letter from the developer or copyright holder giving permission to use the textbook/electronic media must be submitted.

5. POST TEST REQUIREMENTS (FOR SELF-STUDY COURSES)

All self-study (includes textbook/E-Book/electronic media) courses must include a post-test to assess the participant's understanding of the course material and attainment of course objectives. The course provider must grade the post-test and a participant must receive a score of at least 75 percent on the post-test to successfully complete a course. A minimum of 4 post-test questions is required for a course awarded one-half (.5) hour of continuing education credit. An additional 2 post-test questions are required for each additional one-quarter (.25) hour of continuing education credit.

VI. COURSE REVIEW/APPROVAL PROCESS

The education provider must complete and submit Form DH 374 (see attached sample) and the required information, plus the instructor's curriculum vitae (CV), resume or BIO for each separate course 30 days prior to the presentation date. A course can be submitted with multiple instructors. Once on file, the instructor's CV/resume/BIO does not need to be resubmitted.

Form DH 374 will be returned to the provider indicating the results of the evaluation. If the course is denied, the justification for withholding approval will be documented on the form and the provider will be notified in writing.

A course is approved for approximately three years. If the course content is amended at any time during the three-year approval period, then the course must be resubmitted for review as a new course. If the only change in the course is a change of instructor, the instructor's CV/resume/BIO, the approved Form DH 374, and a new Form DH 374 with the new instructor listed need to be submitted for re-evaluation. The original course approval will be amended.

Summary for Continuing Education Course Approval	
1.	Make application on Form DH 374.
2.	Attach a detailed course outline and a description of course objectives for live presentations & all course materials (including post-test) for self-study courses.
3.	Attach the instructor's CV/resume/BIO.
4.	Attach a sample Attendance/Completion certificate.
5.	Attach a copy of approval by ASRT or other CE-approving group, if the course has been approved by such a CE-approving organization.
6.	Submit all documentation 30 days before the presentation date.

VII. SUBMITTING ROSTERS FOR CREDIT

After the completion of the course, course participants must document attendance on the Form DH 406, "Continuing Education Roster" (see attached sample). Only those participant names and certificate numbers on the original Form DH 406 will be given credit for completing the course. Have the instructor sign Form DH 406. If it is not possible to get the instructor's signature the contact person for the provider should sign Form DH 406. The provider must send all Form DH 406 with the corresponding approved Form DH 374 to the address at the top of Form DH 406.

Summary for Submitting Form DH 406	
1.	Fill in the top portion of the original Form DH 406 from the information on the approved Form DH 374. Have those participants who completed the course print and bubble in their name and certificate number in the space provided.
2.	Have the instructor or provider sign the roster.
3.	Mail the original Form DH 406 <u>with a copy of the approved Form DH 374</u> to our office within 30 days after the presentation date.
4.	Keep copies of all information sent to the department for 3 years.

VIII. CONTINUING EDUCATION PROVIDER REQUIREMENTS

A provider of continuing education has certain responsibilities. Being a provider is a privilege. To maintain compliance with department rules, the provider is required to:

- (a) Make application for each course approval on Form DH 374 at least 30 days prior to presentation date;
- (b) Notify the department in writing of any changes in the provider's contact person and address;
- (c) Determine criteria for successful completion of a course and make this information available to participants prior to the beginning of the course;
- (d) Provide evidence that the course instructors are qualified through education and experience in the subject to be presented;
- (e) Adhere to regulations and the numbering system of courses and providers as assigned by this office;

- (f) Document the accuracy of subject matter by reference or bibliography;
- (g) Establish written policies and procedures for implementation of the continuing education program;
- (h) Maintain a system of record keeping which provides for storage of individual course information;
- (i) Maintain records for three years for inspection by the department;
- (j) Provide each participant with written verification of attendance by giving them a certificate of attendance/completion;
- (k) Provide participants with an opportunity to evaluate the learning experiences, instructional methods, facilities and resources used for the course;
- (l) Submit rosters for credit on Form DH 406 within 30 days of presentation date.

IX. CERTIFICATE OF COURSE COMPLETION - REQUIREMENTS

Written verification must be provided to all participants who complete the course. The provider must submit a sample copy of the course certificate along with Form DH 374. The following information must be on the certificate:

- Date of course completion -preprinted
- Course expiration date-preprinted
- Number of CE hours awarded-preprinted
- Signature of the course instructor
- Name of the Florida approved CE Provider-preprinted
- Approved-Florida Provider Number-preprinted
- Course title -preprinted
- Approved Florida Course Number-preprinted
- "00-Technical" or "05-Personal Development" and "Category A Approved" -preprinted
- Name and Florida license number of the participant

- A statement that the course has been approved by the Florida Department of Health Bureau of Radiation Control (FLDOH-BRC)-preprinted

Certificate of Completion

Awarded to:
Mary Smith

Florida License Number: 12865

Successfully completed program titled:

Radiation Protection

Date: February 1, 2023

Expiration Date: January 31, 2026

CE Hours: 2.0

Category: 00- Technical/Category A Approved

Approved FLDOH-BRC course Number: 26001455

Approved FLDOH-BRC Provider Name: Sunshine State Hospital

Approved FLDOH-BRC Provider Number: 3299999

Signature of Instructor or Provider

John Jones

X. AUDITING OF CONTINUING EDUCATION COURSES

Staff members of the Bureau of Radiation Control conduct on-site announced and unannounced audits of continuing education courses throughout the state. The purpose of these audits is to assure that courses meet the content, instructor, presentation and administrative procedures that were originally approved. Participants in the program may be asked to evaluate the effectiveness of the course during an audit. Your cooperation is appreciated.

XI. DISCIPLINARY ACTIONS

Being a provider is a privilege. Providers who fail to meet the requirements of section VIII. may be acted against by the department, including suspension or revocation of their approved courses or approved provider status. Such failure may also result in technologist's being denied credit for such courses.

The department may also revoke approval of a continuing education provider and its approved courses if the provider's certification has been revoked, suspended, or otherwise acted against by a national organization; by a specialty board recognized by the department; or by a certification authority of another state, territory, or country. The department may establish by rule additional guidelines and criteria for the discipline of continuing education providers.

XII. FORM DH 374 & FORM DH 406

Attached are copies of Form DH 374 and Form DH 406.

Additional copies of Form DH 374 can be obtained from the "Forms and Documents" link on the Bureau of Radiation Control's internet site at <https://www.floridahealth.gov/environmental-health/radiation-control/radtech/techform.html> or by contacting the Continuing Educator Coordinator at (850) 245-4266, or by mail at:

ATTN: CE Coordinator
DOH Radiation Control
Bin #C21
4052 Bald Cypress Way
Tallahassee, FL 32399-1741

Since Form DH 406 is a scanable form, originals must always be used. Do not submit an original Form DH 406 with folds or staples. To request additional originals of Form DH 406 you must contact the department in writing. Make sure to include your provider number.

CE PROVIDER INFORMATION SHEET

FLORIDA DEPARTMENT OF HEALTH • BUREAU OF RADIATION CONTROL

PROVIDER NUMBER

--	--	--	--	--	--	--

(IF KNOWN)

TELEPHONE

--	--	--

 -

--	--	--	--

EXTENSION: _____

(PROVIDER)

(CONTACT)

(ADDRESS)

(CITY/STATE/ZIP)

RECEIVED: _____

COURSE #: _____

HOURS: _____

CONTENT/DISPOSITION:

EXPIRES: _____

REVIEWER/DATE: _____ / _____

THIS FORM MUST BE POSTMARKED NO LATER THAN 30 DAYS PRIOR TO THE INITIAL PRESENTATION DATE.

E-mail address (optional): _____ [Under Florida law e-mails are public record.]

Do you want to be listed on the Department's website as a continuing education (CE) Provider? Yes _____ No _____

Location of training: _____

Date(s) of proposed presentation: _____ Time: _____

Title of course: _____

Number of continuing education credits requested (30 minutes of education = 0.5 hour credit): _____

Criteria for satisfactory completion: Attendance (only if live lecture) _____ or post-test (attach copy) _____

Instructor's name & title: _____

Instructor's resume/curriculum vitae attached: Yes _____ No _____ On file with DOH: _____

Course Format: live lecture _____ or self-study _____ If self-study, give type: Online, DVD/CD, Other _____

Is course approved by ASRT or other CE-approving group? Yes _____ No _____ (If Yes, attach copy of approval.)

NOTE: If live lecture, attach a detailed course outline and description of course objectives to this form. If self-study, submit a copy of the self-study materials and post-test for review. If online, provide access instructions.

Signature of Applicant/Provider [print and sign before mailing]

Date

SEND MATERIALS TO:	US Postal Mail Address	or	Overnight Mail Address
	ATTN: CE COORDINATOR DOH RADIATION CONTROL BIN #C21 4052 BALD CYPRESS WAY TALLAHASSEE, FL 32399-1741		ATTN: CE COORDINATOR DOH RADIATION CONTROL ROOM 220.01 4042 BALD CYPRESS WAY TALLAHASSEE, FL 32399

**FLORIDA DEPARTMENT OF HEALTH
BUREAU OF RADIATION CONTROL
Attn: CE COORDINATOR
BIN # C21, 4052 BALD CYPRESS WAY
TALLAHASSEE, FLORIDA 32399-1741**

**THIS SECTION MUST BE
COMPLETED IN ITS ENTIRETY
BY THE PROVIDER**

CONTINUING EDUCATION ROSTER

COURSE TITLE																											
A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	
B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B
C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C
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H	H	H	H	H	H	H	H	H	H	H	H	H	H	H	H	H	H	H	H	H	H	H	H	H	H	H	H
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N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N
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P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P
Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q
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V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V
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X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z

USE NO. 2 PENCIL ONLY

COURSE NUMBER									
0	0	0	0	0	0	0	0	0	0
1	1	1	1	1	1	1	1	1	1
2	2	2	2	2	2	2	2	2	2
3	3	3	3	3	3	3	3	3	3
4	4	4	4	4	4	4	4	4	4
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PROVIDER NUMBER									
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2	2	2	2	2	2	2	2	2	2
3	3	3	3	3	3	3	3	3	3
4	4	4	4	4	4	4	4	4	4
5	5	5	5	5	5	5	5	5	5
6	6	6	6	6	6	6	6	6	6
7	7	7	7	7	7	7	7	7	7
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PRESENTATION DATE				
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HOURS				
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**DO NOT STAPLE
OR FOLD THIS FORM**

INSTRUCTOR'S NAME: _____ INSTRUCTOR'S SIGNATURE: _____

**EACH COURSE ATTENDEE MUST FILL IN THEIR FLORIDA LICENSE NUMBER AND NAME BELOW
OMIT LEADING ZEROS**

NAME: _____ NAME: _____ NAME: _____ NAME: _____ NAME: _____

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PLEASE TURN OVER

