

DRH	to	HRB

X-RAY OPERATORS CERTIFICATION REPORT

The following information is to be gathered during inspections if the facility being inspected is a Physician's Office (as defined by T.C.A. §68-11-1602) and not a Health Care Facility (as defined by T.C.A. §68-11-201(18)). During the inspection, simply ask whomever you can at the facility which kind of a facility it is. If it is determined that it is a Health Care Facility, you do not need to fill out this form. If it is determined that this is a Physician's Office, or you do not know, then fill out this form.

Which Board is this form to be sent to (check one):

- Board of Medical Examiners (M.D.s) Board of Osteopathic Examination (D.O.s)
 Board of Podiatry (D.P.M.s) Board of Chiropractic Examiners (D.C.s)

Registrant/Name of Physician (Include M.D., D.O., D.C. or D.P.M.* /)	Registration Number	
Street Address	City	Zip Code
Name and Title of Person Interviewed	Date	Inspector

(1) Operator Name	(2) Procedure(s) Performed	(3) Certification(s) Held	(4) Exemption(s) Claimed

Instructions: List (1) each x-ray operator, other than a Licensed Physician, Chiropractic Physician, Osteopathic Physician or Podiatrist. For each operator indicate (2) the types of procedure(s) performed and (3) the type of certification(s) held, using the codes in Table 1 below. If an exemption is claimed, indicate (4) the basis for exemption, using the codes in Table II below. If any operator performs procedure(s) without proper certification, or if any exemption is claimed, forward a copy of this form to the Inspection Tracking Administrator (ITA) along with initial notification of inspection. The ITA will log these reports and route through the I & E manager for referral to the Health Related Boards.

Table 1

1. Chest
2. Extremities
3. Spine
4. Skull and Sinuses
5. Bone Densitometry
6. Foot and/or Ankle

Table II

1. Medical Intern, Resident or Clinical Fellow
2. Students engaged in supervised clinical practice while enrolled in training required to receive one of the certificates listed in Table I.
3. Students having completed an approved training program and are awaiting examination (not to exceed six months after completion of training.)

* / M.D. = Medical Doctor; D.O. = Doctor of Osteopathy; D.C. = Doctor of Chiropractic; D.P.M. = Doctor of Podiatry.