

TG 124 Report:  
A Guide for Establishing a Credentialing  
and Privileging Program for Users of  
Fluoroscopic Equipment in Healthcare  
Organizations

Mary E. Moore  
Philadelphia VA Medical Center  
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AAPM 2014 Annual Meeting  
Austin, TX

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TG 124: A Guide for Establishing a Credentialing and Privileging Program for Users of Fluoroscopic Equipment  
in Healthcare Org.

Members of TG 124

- Ben Archer
  - Steve Balter
  - Joel Gray
  - Alan Jackson
  - Rosemary Kennedy
  - Paul Lin
  - Melissa Martin
- Mary Moore
  - Ed Nickoloff
  - Phil Rauch
  - Mark Rzeszotarski
  - Doug Shearer
  - Keith Strauss
  - Lou Wagner

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TG 124: A Guide for Establishing a Credentialing and Privileging Program for Users of  
Fluoroscopic Equipment in Healthcare Org.

Consultants

- Libby F. Brateman
- Karen L. Brown,
- Priscilla (Penny) Butler
- Charles E. Chambers, M.D.
- Thomas Shope
- Gerald A. White

AAPM Staff      Lynne Fairbent

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TG 124: A Guide for Establishing a Credentialing and Privileging Program for Users of Fluoroscopic Equipment in Healthcare Org

Background – WHY do TG124?

- QMPs and RSO’s are not usually involved in C & P process
- TG members experiences with process prompted
  - Sharing experience and lessons learned
  - To help others avoid re-inventing the wheel
- Untrained staff and patients at increased risk
  - Increase use of c-arms by non-radiologists
  - Increase reports of patient injury

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TG 124: A Guide for Establishing a Credentialing and Privileging Program for Users of Fluoroscopic Equipment in Healthcare Org

Format - developed for each section to stand alone

Content – repeated in some sections (policy and implementation sections)

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TG 124: A Guide for Establishing a Credentialing and Privileging Program for Users of Fluoroscopic Equipment in Healthcare Org

Scope of TG 124:

- TG124 addresses only safety and medical physics aspects of fluoroscopy use
- Clinical training requirements and competency for performing specific clinical procedures, interpreting clinical images for diagnosis and any associated emergency responses are beyond the scope of TG124.
- Expands credentialing information originally found in **TG 58** and provides additional training options
- It supplements **TG58**

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TG 124: A Guide for Establishing a Credentialing and Privileging Program for Users of Fluoroscopic Equipment in Healthcare Org

**Organization of TG 124 Report**

**Two Major Divisions**

**1. Credentialing and Privileging**

**2. Training Recommendations**

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**Organization of TG 124 Report**

**1. Credentialing and Privileging**

- A. Basics: Purpose  
Definitions  
Requirements and Fundamentals
- B. Overview Specific to Fluoroscopy Users
- C. Policy Development
- D. Program Implementation

**2. Training Recommendations**

**3. Appendices**

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TG 124:

**Basics - Purpose and Requirements of C&P Program**

- To assure competency
- Fluoroscopy is an interactive imaging procedure that requires the operator
  - to position equipment for correct anatomical projection
  - to operate to maintain lowest possible radiation dose,
  - to concurrently manipulate patient and/or catheter,
  - to administer and track contrast.
  - to simultaneously be aware of patients overall condition during procedure
- Fluoroscopy's multi-faceted process require credentials that support determination of competency:
  - Acceptable Didactic education +
  - Hands-on training
  - Experience (initial and continuing)

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***Basics: Purpose of a C&P Program***

Credentialing and privileging programs exist to assure competency.

Privileges are granted to individuals with appropriate training and experience.

The areas critical for fluoroscopy competency include

- clinical training and expertise,
- knowledge and understanding of radiation safety, radiation biology, and radiological imaging physics,
- technical knowledge of mechanical and electrical safety,
- competency operating the equipment

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TG 124:

• **BASICS: *Definitions***

**Credentialing**

- “...collection of relevant data regarding training and experience of an applicant for privileges.”
- Initial and CME’s
- Verification (Med Staff Office staff : Commercial CVOs)
- Applies to all LIP

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TG 124: **BASICS: *Definitions***

• **Privileges**

“...delineate which medical procedures a staff member may perform.”

- **Who is to be privileged for Fluoroscopy?**
  - Physicians (Non-Radiologists) vs. all LIPs-

• **Types of Privileges**

- Core Privileges (Global: Dx Imaging, )
- Specifically Listed – Specify modality (CT) (MRI) (I.R.)
  - Privilege Request Form - specify Fluoroscopy as separate line item

• **Re-Privileging – 2-year cycle (frequently)**

- refresher fluoro safety course training +
- hands-on training on new equipment

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TG 124 BASICS: Definitions

• **Licensure**

- “ ...official legal permission to practice in an occupation as evidenced by documentation issued by a state in the form of a license or registration.”
- **Physician may be licensed to practice medicine and state may allow any licensed physician to operate x-ray equipment, but individual physician may not have specific privileges to perform fluoroscopy or other x-ray procedures at a facility**

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TG 124: BASICS: Definitions

• **Regulations**

- X-ray equipment use regulations are developed, promulgated and enforced by specified state authority.
- All X-ray users are required to comply with state regulations.
- Some states have developed regulations that address fluoroscopy users (Ca, Tx)

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Organization of TG 124 Report

1) Credentialing and Privileging

- A) BASICS: Purpose, Definitions, Requirements and Fundamentals of Credentialing and Privileging Program
- B) Overview of Process of Establishing C&P program Specific to Fluoroscopy Users:**
- C) Policy Development and Implementation
- D) Program Implementation – Administrative Aspects

2) Training

- A) Recommendations for Competency Based Program
- B) Overview and Resources

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TG 124 – Overview of Establishing a C&P Program

**Overview Specific to Fluoroscopy Users:**

*IDENTIFY AND VERIFY*

- Need for Program
- Support by Management and Senior Clinical Staff
- Available Expertise and Staff

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**Overview of the Process for Establishing a Credentialing and Privileging Program**

- Determine the Need for a Fluoroscopy Credentialing Program at your facility
- Who uses fluoroscopy equipment
- How is it used?
- Where is it used?

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Overview A) Determine Need for Program

How is need determined?

- RSC = Appropriate body to determine if formalized review and approval of fluoroscopy users is needed
- Individuals: RSO , QMP, Chairs and Administrators of departments using fluoroscopy should assist the RSC, in developing a viable policy.

If no RSC - Medical Director + designated staff assist

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Overview: B) Learn fundamentals of C&P Process

- Designate and individual – RSO or QMP or ?
- Contact your Medical Staff Office (MSO)
  - Establish communications
  - Obtain information about
    - your facility's credentialing and privileging process.
    - how your facility's establishes and integrates a new program into the current credentialing and privileging program.

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Overview: C) Staffing Needs, Expertise, Management Support

- Determine staffing needs and expertise required
  - to develop,
  - to support, and
  - to maintain a Credentialing and Privileging Program
 In house training may be needed as part of C&P
- Obtain Support for Establishing a Program.
  - Without medical leadership and administration's full support the program will not be able to be sustained
  - if it gets started.

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Overview: D) Develop a Policy

*Develop a Policy*

- That identifies
  - specific program responsibilities,
  - review and approval procedures,
  - required credentials for initial privileges,
  - requirements for re-privileging.

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*Overview: D) Develop a Policy*

- That indicates
  - Who may operate fluoroscopy equipment
  - Where the equipment may be used
  - What conditions, and for
  - Which procedures.

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*Overview: E) Implement and Maintain Fluoro C&P*

- That ensures
  - fluoroscopy privileges are approved
    - for only qualified individuals,
    - as determined by the policy,
  - Compliance with all applicable
    - state and federal regulations,
    - facility and accreditation requirements, and standards.

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*Overview: F) Competency Based Training Program*

Develop a Competency Based Training Program

- for applicants without the required training and experience,
- for applicants who need refresher training.

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Overview: G) Records and Audits

- Maintain Records and Issue Approved User Certification.
- Assess Program Compliance and Applicability through periodic review.
  - Identify staff for above responsibilities

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**Fluoroscopy Users, Location of Use, and Compliance**

Identification of Current Fluoroscopy Users, Their Training, and Experience

Use Systematic approach to identify all users and uses

- C&P program ( MSO) *should/may* be able to
- Not if privileges list does not ID them
- Fluoroscopy logs may have names
- Archived studies (C-arms) may have names
- Personnel dosimeters

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**Fluoroscopy Users, Location of Use, and Compliance**

Once users have been identified

- MSO - provide residency fellowships information and program contacts
  - On line info – residency specific
- Training ranges from
  - only on-the-job experience w no didactic
  - to competency-based evaluation of individual completed specified #hrs didactic and # supervised procedures

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Figure 2. A Model for Developing a Fluoroscopy Credentialing and Privileging Program Policy (Note: Not all elements will apply to all facilities.) p20

**Policy Development by RSC Ad-Hoc Committee**

- Specify scope and designated responsibilities,
- Identify administrative process and responsibilities: application, review, approval
- Establish required credentials and criteria for approval
  - Users: Physicians only, or also independent licensed practitioners
  - Required training and experience (residency or equivalent)
  - Compliance with state and professional standards
- Alternate pathway to acquire training and experience
  - Specify who requires, who provides and oversees training
  - Specify training content, acceptable methods, and required experience
- Re-privileging requirements and frequency certificate issued by RSC when training and experience criteria are met. Record maintenance and retention




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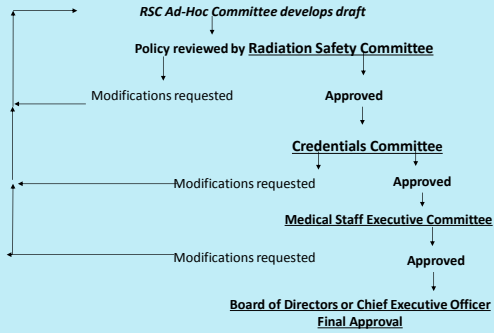
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Figure 2. A Model for Developing a Fluoroscopy Credentialing and Privileging Program Policy




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**REMEMBER**

- Add approved policy to Operations Manual and
- Distribute to department chairs and MSO

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**C & P Program Implementation**

- Administrative Process and Responsibilities
  - MSO
  - Department Chair
  - Medical Director of Section
  - RSO
  - QMP
  - RT
  - Nurse Manager

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**C & P Program Implementation**

*Privilege Application Review Process.*

**Prepare Standard Operating Procedure for Application Reviews.**

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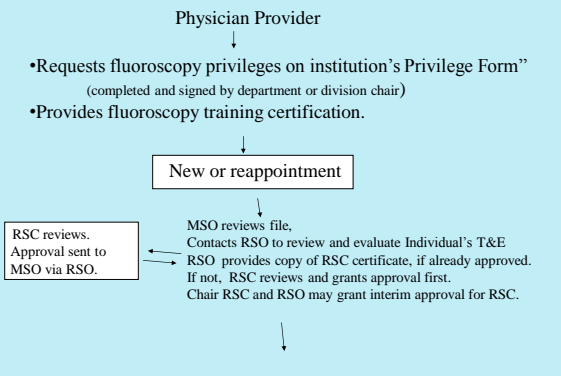
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Figure 4. Sample Process for Granting Fluoroscopy Privileges p 38




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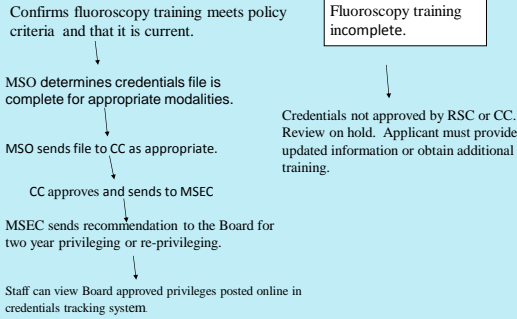
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Figure 4. Sample Process for Granting Fluoroscopy Privileges




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TG 124: A Guide for Establishing a Credentialing and Privileging Program for Users of Fluoroscopic Equipment in Healthcare Org

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**2. Training Recommendations**

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TG 124: A Guide for Establishing a Credentialing and Privileging Program for Users of Fluoroscopic Equipment in Healthcare Org

**Training Requirements and Recommendations for Competency Based Program**

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TG 124: Training

- Availability of post-residency training
  - professional organizations provide the training needed for obtaining fluoroscopy privileges.
- Scope of training needs to be commensurate with the risk and complexity of the procedures to be performed.
- Didactic and Operational Training should include
  - medical imaging and physics,
  - radiation biology,
  - radiation safety,
  - equipment design (including operational features), and
  - hands-on training and experience.

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TG 124: Training

Acceptable qualifications and training for fluoroscopy users is based on three risk levels:

- Low,
- Moderate, and
- High Risk.

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TG 124: **Table 2. Levels of Risk and Required Initial Training p48**

Risk	Equipment Procedures	Recommended Minimum Duration of Training	Didactic Training Course Content Based on Risk
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- *Initial training applies for new applicants.*
- *Continuing education (refresher training) is addressed in Appendix A, Section 3.*

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TG 124: Training

All training programs should require the following for all three risk levels:

- Training and experience complies with facility’s credential requirements for the fluoroscopy risk level of the requested clinical procedures/ exams
- Didactic training commensurate with fluoroscopy risk level
- Satisfactory completion of an examination on didactic material.
- Applicant’s successful demonstration of competency [implements safe practices while performing clinical procedures using fluoroscopy equipment commensurate with assigned risk levels].

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TG124: Training

Applicants lacking either training or experience should successfully accomplish the following:

- Complete didactic training at the appropriate fluoroscopy risk level for their specialty and the procedures they will perform
- Pass an examination on the didactic material
- Successfully demonstrate competency at the fluoroscopy risk level needed for their practice
- Receive written evaluation of applicant’s competency using the specified fluoroscopy equipment.

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TG 124: A Guide for Establishing a Credentialing and Privileging Program for Users of Fluoroscopic Equipment in Healthcare Org

Appendix A

- Additional information and guidance
- Training references and resources

Note: TG 124 is on AAPM website

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QUESTIONS ?

[MaryE.Moore@va.gov](mailto:MaryE.Moore@va.gov)

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Thank You for attending!

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