



## Radiologist Assistants in the United States - Here to Stay?

# Radiologist Assistant

Advanced roles for radiology technicians/ radiographers have been defined in a number of countries, including the UK, Australia and the United States, where the roles of radiologist assistants (RA) were first defined in 2002. A radiologist assistant (RA) is defined as "an advanced level radiographer who could take responsibility for patient assessment, patient education and patient management, perform fluoroscopy and other radiology procedures, and make initial image observations". However, numbers remain small, at around 336 (compared to around 3748 in the UK ([Diagnostic radiography UK workforce report 2014](#)), and there are 10 RA education programmes. The further growth of the role is limited by the fact that the Centers for Medicare and Medicaid Services do not recognise the role.

Cindy Petree, a radiologist assistant from Indiana, addresses the challenges and barriers to growth in the profession, writing in [Imaging & Oncology](#).

Petree argues that RAs can add value to radiology practice by doing some of the non-invasive and minimally invasive procedures, while the radiologist focuses on more complicated examinations like reading MRI and PET scans. Clinical activities RAs can perform include physical examinations, non-invasive procedures such as upper gastrointestinal studies, and minimally invasive procedures such as arthrograms.

As the role is not recognised, it means that radiologists must be in the examination room for any procedures the RA performs. If not, then the exam is not reimbursed. Some private insurance companies do not have such stringent guidelines for the role, however. Attempts to introduce cover by Medicare have been introduced in Congress. The proposal would be that RAs perform a procedure under the direct provision of a radiologist, who is required to be readily available in the same building, and the radiologist would receive 85% reimbursement. This represents huge potential savings for Medicare and Medicaid, writes Petree. A barrier to passing such legislation may be the precedent of adding nurse practitioners and physician assistants to the public system. Costs increased as these groups ordered additional tests such as blood tests and imaging.

There are around 192,000 nurse practitioners and 100,000 physician assistants in the United States. Both groups waited nearly 20 years for federal recognition and reimbursement, but now have a necessary role in healthcare.

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