



ALABAMA BOARD OF MEDICAL EXAMINERS

P.O. Box 946 / Montgomery, AL 36101-0946 / (334) 242-4116

*Under Alabama Law, this document is a public record
and will be provided upon request*

Request to Train: Fluoroscopy

Supervising Physician Name: _____ **AL License #** _____

Physician Assistant Name: _____ **AL License #** _____

A protocol for training as well as the performance of fluoroscopy by PA must be provided. Protocol templates are available upon request. Training may not begin until the supervising physician receives written approval from the Board of Medical Examiners.

Supervising Physician Qualifications: The supervising physician must be actively engaged in the practice of fluoroscopy, perform fluoroscopic procedures on a routine basis, and be able to provide proof of training in radiation safety. If applicable, the supervising physician must be hospital credentialed in the use of fluoroscopy.

Practice Site: Hospital, Physician Office, Ambulatory Surgical Center. Any practice site not listed requires an additional request outside of protocol.

[Out of Protocol Skill Request Form.pdf \(albme.gov\)](#)

Physician Availability: The supervising physician, or a pre-approved covering physician who meets the same qualifications as the supervising physician, must be immediately available onsite during fluoroscopy procedures performed by the PA.

Training and Competency: The PA must complete a course and receive certification from one of the following prior to the clinical component of training:

1. [Basic Training Program | FluoroSafety](#)
2. [Fluoroscopy Test Preparatory Course \(aapa.org\)](#)

The clinical component of training will consist of the PA's performance of 15 cases using fluoroscopy while being directly observed by the supervising physician or covering physician.

The PA and supervising physician will participate in ongoing education and training to maintain or increase their competency. The PA must complete and document 10 cases using fluoroscopy annually. Maintenance of competency training or procedures must be documented and readily retrievable.

After approval to train is granted by the Board, and prior to the Board's consideration of the PA's completed documentation of training, proof of course completion and certification from FluoroSafety or AAPA must be submitted.

Patient Diagnosis and Referral: The procedure will only be performed by the PA when delegated by the supervising physician.

Quality Monitoring and Adverse Outcome Review: All final procedure images and reports will be reviewed and signed by the supervising physician or pre-approved covering physician. Quality will be monitored using qualitative and quantitative data through the Supervised Practice Quality Assurance Plan.

[QAPlanSupervisedPractice.pdf \(albme.gov\)](#)

All cases exceeding 3 minutes of fluoroscopy time will be reviewed with supervising physician and documented as a part of the Supervised Practice Quality Assurance Plan. Any adverse outcome will be recorded and reported to the site's designated radiation safety officer.

The results of staff dosimetry monitoring are reviewed at least quarterly by the radiation safety office/ diagnostic medical physicist to assess staff radiation exposure levels. A designated radiation safety officer will monitor compliance with radiation safety procedures, provide recommendation for improved radiation safety, intervene as indicated and implement corrective action.

By signing this form, I, the supervising physician, and physician assistant, certify that I have read and understand the requirements listed above and attest that the requirements have been met or will be met in order for the physician assistant to perform the procedure.

Supervising Physician Signature: _____ **Date:** _____

Physician Assistant Signature: _____ **Date:** _____