Ethics touch everyone.

Those who violate ethics are, or should be, sanctioned. Go to any licensing board Web site and you will find lists of individuals found guilty of ethical violations.
The radiologic sciences profession is no different from other professions when it comes to the importance of ethics. The ASRT and American Registry of Radiologic Technologists jointly developed a code of ethics for the profession. The ARRT develops and enforces Standards of Ethics.

Many of the questions I receive at the Office of Practice Issues center around ethics. More often than not, technologists find themselves pressured into performing a task outside of their scope of practice or are asked to cut corners in established procedures. This pressure can be accompanied by an “or else” demand — the threat of termination.

Here are some examples.

**Throughput Is What We’re After**

Before beginning an imaging exam, an R.T. seeks to confirm if the patient is pregnant, in accordance with the practice standards and generally accepted radiologic technology procedures. The patient doesn’t know if she is pregnant and there might be clinical indications of a pregnancy, so the R.T. recommends contacting the radiologist or the ordering physician about a pregnancy test. The R.T.’s supervisor insists that the imaging exam be done pronto and pressures the R.T. to have the patient sign a consent form saying she is not pregnant. The R.T. refuses and is threatened with termination if she doesn’t perform the imaging procedure immediately.

What would you do? Face termination or potentially harm your patient or her fetus? What drove this situation in the first place was a mandate from the administration to get as many patients through imaging procedures as quickly as possible.

What would you do? Face termination or potentially harm your patient or her fetus?

This is not an easy issue. Ethical dilemmas rarely are. What if the technologist decides to comply with her supervisor, performs the imaging procedure and it turns out that the patient is pregnant? What if the procedure results in harm to the fetus? If you were the technologist who performed the procedure, how would you feel? We all are aware of the inevitable lawsuit that would be filed. What if the patient is not pregnant? No harm? Not necessarily. Rule 7 of the ARRT Rules of Ethics states that it is an ethics violation:

“Delegating or accepting the delegation of a radiologic technology function or any other prescribed health care function when the delegation or acceptance could reasonably be expected to create an unnecessary danger to a patient’s life, health or safety. Actual injury to a patient need not be established under this clause.” (ARRT Rules of Ethics.)

Clearly, the insistence on pushing the procedure was a delegation of a radiologic technology function that could create an unnecessary danger. A pregnancy test was in order. Regardless of what happened to the patient, this situation involves a potential ethical violation. The unfortunate part is that regardless of the choice, the technologist does not fare well. She could either be terminated for
insubordination or risk practicing under the cloud of an ethics issue. She might choose the lesser of two evils.

For situations in which a termination can be appealed, it is much harder to make termination stick when the employee acted under her profession’s code of ethics. Many employers build such appeals processes into their employment policies. Taking the time to read the employment manual might provide some insight. And it doesn’t hurt to find out about the labor laws in your state.

In the situation described above, if the supervisor is an R.T., there is another twist to the problem. The ethics rules have a provision where a registered technologist has a duty to report a suspected ethical violation, according to Rule 21:

“Knowing of a violation or a probable violation of any Rule of Ethics by any Registered Technologist, Registered Radiologist Assistant or candidate and failing to promptly report in writing the same to the ARRT.” (ARRT Rules of Ethics.)

What drove this situation in the first place was a mandate from the administration to get as many patients through imaging procedures as quickly as possible. Hopefully, state safety inspectors, Joint Commission on the Accreditation of Healthcare Organizations inspectors and other accreditation surveyors will watch for violations as well.

**R.T.s who take a continuing education quiz and then post the answers for others to copy are in violation of the Rules of Ethics.**

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**Repeat Exam? What Repeat Exam?**

The next example involves record keeping. In this hypothetical case, a clinic had a repeat rate slightly above the national average. One of the R.T.s is asked to compile the data. The supervisor changes the report and chooses not to count some of the repeated procedures, saying the repeated exams weren’t necessary. The patients’ records also were altered to remove the repeats. The institution’s figures are now slightly less than the national average.

Not only is the data of repeated radiographs a measure of the quality of image production, it also is a record of a patient’s dose exposure. Altering that record violates environmental protection laws. The ethics rules violated are Rules 10 and 14, respectively:

“Engaging in any unethical conduct, including, but not limited to, conduct likely to deceive, defraud or harm the public; or demonstrating a willful or careless disregard for the health, welfare or safety of a patient. Actual injury need not be established under this clause.” (ARRT Rules of Ethics.)

“Improper management of patient records, including failure to maintain adequate patient records or to furnish a patient record or report required by law; or making, causing or permitting anyone to make false, deceptive or misleading entry in any patient record.” (ARRT Rules of Ethics.)

Additionally, if the Office of Inspector General at the U.S. Department of Health and Human Services found out that patients’ records were altered, the institution could be investigated if it participates in Medicare or Medicaid programs. And if alterations of repeat rates are tolerated at the facility, doesn’t it make you wonder what other falsifications there could be?

**Too Good To Be True**

Ethics situations do not always have to involve negative circumstances. What if you were tempted by a job that offered less stressful working conditions and more pay. A catch? Glad you asked.

“I was contacted by a medical facility needing an R.T. to train their staff on a new machine. I am not completely certain of all the details, but I suspect they are trying to find someone to train non-R.T.s to operate their new machine. Is it against our code of ethics to train noncertified staff to operate a radiograph machine? They are offering a substantial amount of money, and I heard they are having a hard time finding someone. Your thoughts on this issue are appreciated.”

Rule 15 comes into play here:

“Knowingly aiding, assisting, advising or allowing a person without a current and appropriate state permit, license or registration certificate or a current certificate of registration with ARRT to engage in the practice of radiologic...
Web Sites on Ethics

By Debbie Freeman, ASRT Scanner Associate Editor

You’re familiar with how to find the American Registry of Radiologic Technologists Code of Ethics, the ASRT’s Practice Standards and the Joint Commission on the Accreditation of Healthcare Organizations standards. Here are four sites you might not know about.

Markkula Center for Applied Ethics
www.scu.edu/ethics/practicing/focusareas/medical/articles.html

With a clean and classic appearance, this Santa Clara University Web site covers ethics for just about every area — business, biotechnology, health care, character education, global ethics, government and technology. But the real gems here are the articles on everything from “Everyday Ethics” to “Can Ethics Be Taught?” The ethics resources for students and teachers are especially helpful, in addition to case studies, links to other sites and a message board where you can ask questions. Last but not least – don’t miss the health care links page.

Ethics in Medicine
http://depts.washington.edu/bioethx/toc.html

At first glance, this Web site from the University of Washington looks like a laundry list of things health care workers should know. It also appears to not have been updated in a while, with some items having very little information. But don’t let that stop you from checking out what is there. Good information can be found, even if it doesn’t look very pretty. Some of the topics include parental decision making, medical futility and cross-cultural issues. The case studies may very well be one of the best things about this Web site. Presented in a tiered fashion, each case study includes the case, a discussion and the resolution. Keep your eyes open for cleverly hidden links throughout the site to take you to more resources and tools.

Center for Ethics and Professionalism
www.acponline.org/ethics/index.html?idx

You don’t have to be a physician to find useful information on this Web site from the American College of Physicians. In addition to the complete Ethics Manual, you’ll find case histories, procedures for addressing ethical complaints and ethics discussions on managed care and end-of-life issues. The site also contains a lot of information about professionalism and human rights. Other goodies include a legislative action center, links to online bioethics resources, a store for ethics-related materials, a calendar of meetings and free-for-members patient education tools.

Health Privacy Project
www.healthprivacy.org

Don’t be put off by the bright yellow background and planetary style of information circling this site. Plenty of good information can be found here if you need to know about the Health Insurance Portability and Accountability Act and other privacy-related issues. Not only will you be informed, your friends and patients who have questions about their privacy rights will appreciate knowing about this site. Make sure you check out the following sections: Health Privacy 101, myths and facts about the HIPAA privacy legislation, the health privacy primer for consumers, summary of state statutes about health privacy, national laws, resources and articles written by the HPP.
technology, in a jurisdiction which requires a person to have such a current and appropriate state permit, license or registration certificate or a current and appropriate registration of certification with ARRT in order to practice radiologic technology in such jurisdiction.” (ARRT Rules of Ethics.)

In a state that licenses radiologic technologists, the proper action would be to decline the offer or offer to train only those who meet state licensure requirements.

What Are Your Convictions?

As the ASRT health policy manager, I get asked some interesting questions.

“Dear ASRT,
I am interested in becoming a radiologic technologist. The only problem is I have a previous conviction for ___________. What are my chances of being allowed to practice?”

The blank to be filled in has included crimes such as manslaughter, drug possession, possession of drug paraphernalia, prostitution, auto theft, armed robbery and driving while intoxicated. What are the chances this person will be allowed to practice? The ethics rules consider criminal convictions serious offenses; the ARRT makes decisions on a case-by-case basis. Rule 3 states:

“Convictions, criminal proceedings or military court-martials as described below:

(i) Conviction of a crime, including a felony, a gross misdemeanor or a misdemeanor, with the sole exception of speeding and parking violations. All alcohol and/or drug related violations must be reported. Offenses that occurred while a juvenile and that are processed through the juvenile court system are not required to be reported to the ARRT.

(ii) Criminal proceeding where a finding or verdict of guilt is made or returned but the adjudication of guilt is either withheld deferred, or not entered or the sentence is suspended or stayed; or a criminal proceeding where the individual enters a plea of guilty or nolo contendere (no contest).

(iii) Military court-martials that involve substance abuse, any sex-related infractions or patient-related infractions.” (ARRT Rules of Ethics.)

Additionally, many states have their own restrictions on employing health care workers who have prior convictions within the state.

What Do You Mean It’s Cheating?

From time to time there are incidents of ethics violations by a small number of R.T.s. For the vast majority who are honest and forthright, the rules are a way of self-policing the profession, as other professions do. As an example, R.T.s who take a continuing education quiz and then post the answers for others to copy are in violation of the Rules of Ethics. If you do not report this, you, too, are in violation. (See Page 32 for other examples of CE ethics violations.)

Then there was the R.T. who sent a copy of a quiz to me and asked me for help with the answers. She was required to pass the quiz as a condition of continued employment. She had lost the reference material in an auto accident. Both of these situations are examples of cheating and violate Rule 1:

“Employing fraud or deceit in procuring or attempting to procure, maintain, renew or obtain: reinstatement of certification or registration as issued by ARRT; employment in radiologic technology; or a state permit, license or registration certificate to practice radiologic technology. This includes altering in any respect any document issued by the ARRT or any state or federal agency, or by indicating in writing certification or registration with the ARRT when that is not the case.” (ARRT Rules of Ethics.)

Some states have continuing education requirements written into their licensing regulations. Those states recognize credits earned through ASRT Directed Readings and the credential issued by the Registry is recognized as the state license. So the first example of cheating is a violation of the state licensure laws as well as an ethics violation. One wonders how the R.T.s who copied the answers would feel if they heard that several physicians in the community cheated on their continuing medical education and then treated them or their family members.

Those copying the answers aren’t the only culpable individuals. Don’t forget the R.T. who posted the answers. She’s just as guilty.

Do you know of R.T.s committing similar violations? As a reminder, Rule 21, discussed earlier, applies to this scenario as well.

It is important to remember that those who willfully commit ethical violations diminish the honest practitioners.
A frustrated R.T. once remarked about feeling like the “Rodney Dangerfield” of health care. For those who are too young to remember Rodney Dangerfield, he was a comedian whose routine centered on how he never got any respect. It’s hard to respect those who think so little of their profession that they think nothing of cheating. This reflects poorly on the whole profession.

Many ethical situations arise out of a lack of knowledge by R.T.s and their supervisors. It helps to review the rules governing your profession from time to time. Review the ethics rules at the Registry Web site, www.arrt.org/ethics/standardethic.pdf. The ASRT Practice Standards for Medical Imaging and Radiation Therapy are available on the ASRT Web Site at www.asrt.org/opi.

When facing an ethical situation, keep in mind that the ARRT cannot answer questions about an ongoing investigation, nor can it indicate how it might rule on a possible situation. Likewise, the ASRT cannot speculate on how the Registry might rule. Each case is reviewed individually and rulings are based on all the facts. In some cases consultation with an attorney might be necessary, depending upon the charge and the seriousness of the situation.

Like anything else in health care, an ounce of prevention is worth a pound of cure. Providing copies of the practice standards, ethics rules and the ASRT Position Statements to your coworkers and supervisors might prevent an improper situation from occurring later. Becoming familiar with the policies and procedures of the facility is helpful, too. Finally, find out who coordinates JCAHO compliance at your facility to gain insight on the compliance requirements and perhaps become involved in the process. The more you know and understand up front, the less likely you will be to encounter problems and dilemmas later.

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