## INTERPRETING MAMMOGRAMS



Olds Plaza Building, 10th Floor Lansing, Michigan 48909 Phone: 517/373-6466 House Bill 4529 Sponsor: Rep. Maxine Berman Committee: Public Health

Complete to 7-8-93

## A SUMMARY OF HOUSE BILL 4529 AS INTRODUCED 3-23-93

Public Act 56 of 1989 amended the Public Health Code to, among other things, regulate both radiation machines used for mammography and the (nonphysician) technologists who operate them.

The bill would require that radiation machines used for mammography be operated only under the supervision of, and that mammograms be interpreted by, board-certified physicians who specialized in radiology. Supervisors would be called "mammography supervisors" and those interpreting mammograms would be called "mammography interpreters." The bill also would raise fees for inspections of mammography machines by \$200. Currently, the fee for the Department of Public Health (DPH) to evaluate whether a radiation machine used for mammography is in compliance with the act is \$500 (\$400 for each additional radiation machine). The bill would raise these fees to \$700 and \$600, respectively.

The bill would define two new terms, "mammography supervisor" and "mammography interpreter." Both would have to be board-certified physicians specializing in radiology who would be required to successfully complete at least 15 hours of DPH-approved continuing medical education every three years after the bill took effect. The continuing medical education would have to be in subjects related to mammography (including interpretation and technical aspects of mammography), and the physician would have to document, to the department's satisfaction, that he or she had successfully completed such continuing medical education.

A "mammography interpreter," in addition, would:

\* be responsible for evaluating and interpreting mammographic images;

\* have to interpret at least 520 mammographic examinations each year;

\* have to keep satisfactory annual records of outcome data on positive mammograms to biopsies done and on the number of cancers detected; and

\* be required to have at least two months of formal, documented DPH-approved training in reading mammograms ("with specific instruction in medical radiation physics, medical radiation effects, and medical radiation protection"). The Department of Public Health could accept, in lieu of this training, time spent in a residency program specifically limited to mammography, if the physician satisfactorily documented his or her residency program.

A "mammography supervisor" would be responsible for quality control, radiation safety, and technical aspects of all mammography-related X-ray examinations and procedures (including, but not limited to, the supervision of individuals who operated mammography machines or otherwise performed mammographic services). A mammography supervisor also would have to satisfactorily document that he or she had successfully completed at least 40 hours of DPH-approved continuing medical education in medical radiation physics, medical radiation effects, medical radiation protection, and the technical aspects of mammography.

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