



March 30, 2026

Executive Director, Professional Regulation and Oversight
Ministry of Health

Sent by email to: PROREGADMIN@gov.bc.ca.

Re: CAMRT-BC Response to Public Consultation on Scope of Practice Changes for Physical Therapists and Registered Nurses.

On behalf of the Canadian Association of Medical Radiation Technologists of British Columbia (CAMRT-BC) and its members, we are providing the following feedback in response to the Ministry of Health's public consultation on the proposed changes to the scope of practice for physical therapists and registered nurses under the Professional Regulation and Oversight framework.

Medical Radiation Technologists (MRTs) serve as a vital link between compassionate patient care and the advanced imaging and therapeutic technologies that are foundational to modern healthcare.

The proposed scope of practice changes for both physical therapists and registered nurses are anticipated to have a substantial impact on the daily practice of MRTs, particularly in the areas of radiologic technology, nuclear medicine, and magnetic resonance imaging. It is essential that the implications for MRT workflow and workload within diagnostic imaging be carefully considered as part of the implementation planning.

For the purpose of this submission, we have organized our feedback into two sections, outlining our considerations and concerns for each scope of practice change.

Feedback on physical therapists issuing authorization to apply hazardous energy for diagnostic or imaging purposes.

CAMRT-BC recognizes the rationale for expanding the scope of practice of physical therapists to include the authority to order diagnostic imaging exams. However, these changes must be implemented in a carefully planned and coordinated manner to ensure patient safety and system sustainability.

Expanding access to imaging, while potentially freeing capacity in emergency rooms and primary care provider offices, will likely put increased strain on already overburdened imaging departments. Investments need to be made in imaging department staffing, equipment and operational capacity to prevent longer wait times, increased workload pressures and potential impacts on the quality of patient care.

Equally as important, CAMRT-BC emphasizes ensuring that all professionals authorized to order diagnostic imaging have appropriate education and training. This includes a clear comprehension of imaging appropriateness, clinical indications/referral guidelines and a thorough understanding of radiation safety principles. Competency standards will be critical in minimizing unnecessary or duplicate imaging, optimizing resource use and safeguarding patients. As the scope of practice evolves, it is essential that programs educating this group of professionals update their curricula to equip them with the necessary knowledge, skills, and judgment for safe clinical decision making. This balanced approach will ensure improved access to care while maintaining the integrity and sustainability of BC's healthcare system.



Feedback on Registered Nurses and Registered Psychiatric Nurses applying low complexity X-rays for diagnostic or imaging purposes.

The wording in the Ministry of Health proposal suggests a broad expansion of scope that can be interpreted as applying to all RNs and RPNs across British Columbia. CAMRT-BC has significant concerns with this approach as it would be an unnecessary addition for the majority of nursing professionals. Currently in BC, the administration of X-rays is performed by MRTs who undergo years of specialized training to become certified, and these duties should not be ascribed to another profession without equivalent training and education.

It is our recommendation that application of X-rays remain the responsibility of an MRT or other appropriately trained professional. In situations where access to such professionals is not feasible (such as the remote areas described in the rationale for this change), a clearly defined delegated medical act could be established for the professionals directly involved, rather than a full scope change across an entire professional group.

In addition to the above, CAMRT-BC has significant concern about the terminology “low complexity X-rays”. This phrase lacks a standardized clinical and technical definition. CAMRT-BC feels that such a lack of specificity would lead to inconsistency in interpretation and application. Any delegation of acts to another profession for the delivery of X-rays would necessitate precise language to set specific boundaries for application. Any such language should be developed in concert with the professional groups directly involved in these practices, including MRTs.

CAMRT-BC understands the longstanding and significant challenges faced by First Nations, as well as rural and remote communities, in accessing healthcare services, including diagnostic imaging. We acknowledge the importance of improving health equity and are committed to supporting solutions that address these gaps in a safe, respectful and sustainable manner.

We also accept that demand for imaging services in these communities is limited and may not support the need for a dedicated MRT position. Throughout Canada, CAMRT has supported the implementation of different models that have resulted in the successful delivery of imaging services to underserved regions through certified MRTs and other appropriately trained professionals. These models demonstrate that access can be improved while maintaining high standards of patient care, image quality and radiation safety.

Patient safety, image quality, and radiation safety must remain paramount for any proposed model. The MRT profession is highly specialized, requiring dedicated education, clinical training and ongoing competency assessment. The integrity of this should not be compromised by this initiative.

Below are important considerations for the potential delegation allowing non-MRTs to apply X-rays in First Nations and rural/remote communities.

1. *Clarity of Language and Definitions*

Any delegation of acts to another profession for the delivery of X-rays would necessitate precise language to set specific boundaries for application. Any such language would need to be developed in concert with the professional groups directly involved in these practices currently, including MRTs. The vague language of “low complexity X-rays” in the current proposal is highly imprecise and would lead to inconsistency in interpretation and application.



2. *Education and Training Requirements*

MRTs are highly trained healthcare professionals who undergo extensive specialized education and clinical training to become certified in the field. This includes in-depth instruction in anatomy and physiology, pathology, patient positioning, radiation physics, radiation safety, quality assurance and safe operation of imaging equipment to name a few. This allows them to perform diagnostic imaging procedures safely and effectively, minimizing risk to themselves and their patients. The proposal does not outline how RNs or RPNs designated to apply X-rays would be prepared to meet comparable competencies. If this scope expansion is to be considered, it is essential that an equivalent training pathway be clearly defined, standardized and continuously evaluated.

3. *Radiation Safety*

A comprehensive understanding of radiation safety is foundational to the operation of X-ray-emitting equipment and the protection of patients, oneself, and other healthcare providers. This competency must be formally embedded within training programs and must be continually reviewed to ensure best practice.

CAMRT-BC is committed to working collaboratively with the Ministry of Health and health system partners to explore innovative and evidence-based solutions to improve access without compromising the integrity of medical imaging practices. We welcome the opportunity to contribute our expertise to ensure that any approach taken upholds the highest standards of patient care while meeting the needs of underserved communities.

Sincerely,

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