



# 2009 Staff Utilization Survey

# ahra

**the association for  
medical imaging management**

# 2009 Staff Utilization Survey

This survey was made possible through funding from AGFA HealthCare.



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## Procedure Volume Tables *(continued)*

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|---|------|
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| PET.....                                    | F-3  |
| Ultrasound and/or Vascular Ultrasound ..... | F-4  |
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| Nuclear Medicine - Radioassay .....         | F-7  |
| MRI .....                                   | F-8  |
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## **FINDINGS**

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## FINDINGS: About This Research

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### About This Study

This Internet survey of emailable imaging professionals was conducted on behalf of AHRA: The Association of Medical Imaging Management to develop a profile of the staffing and capabilities at facilities engaged in the imaging professions. It was conducted by Readex Research, an independent research firm.

The survey was designed jointly by AHRA and Readex, building on a similar effort undertaken by AHRA in 2006. The invitation to participate was emailed to all 9384 sample members (including both AHRA members and nonmembers). Data was collected via the Internet between April 8 and April 30, 2009.

A total of 328 sample members responded (4% response rate, based on the net effective mail out). Because a significant fraction of those invited to participate chose not to do so, the possible effects of nonresponse bias on these results should be considered. Percentages based on all 328 responses are subject to a margin of error of  $\pm 5.3\%$  at the 95% confidence level. Percentages calculated on smaller tabulation bases are subject to more statistical variability.

### About This Report

This initial Findings section provides a graphical summary of key survey results.

The Tables section of the report presents 4 sets of survey results, broken out by a number of variables.

The Appendix provides a copy of the survey instrument itself.

For the purposes of this survey, the term **procedure** indicates imaging exams performed by a facility during the most recently completed fiscal year. Survey participants were asked to answer for the number of procedures, not the number of patients. For example, if a total of 300 procedures were performed during the treatment of 100 patients, the answer would be 300.

The term **full time equivalent (FTE)** was considered to work 40 or more hours per week, or at least 2080 hours per year.

This report was prepared for AHRA by Readex in accordance with accepted research standards and practices. This report contains all survey results that were provided to AHRA.

## FINDINGS: About This Research

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### Data Interpretation

In addition to percentages, 3 summary statistics may be presented in this report for numeric variables.

A mean is the arithmetic average of a distribution (ie, a set of values). Because it is arithmetically calculated, it can be multiplied by the population represented to present a total volume estimate. For example, if 100 survey respondents (representing 10,000 people in the population) reported mean expenditures of \$100 each, total expenditures for that population are estimated as  $10,000 \times \$100 = \$1,000,000$ . Means are very much influenced by extremely large or extremely small values in the distribution (eg, one millionaire can substantially raise an estimate of average income).

Means for grouped data are calculated using the midpoint of each range. The lowest valued group is represented by its largest value; the highest valued group by its lowest.

The standard error measures the variability associated with the survey's estimate of a population mean. The standard error is analogous to the margin of error associated with percentages: that is, 95% of the time we expect the true (unknown) population mean to be within plus-or-minus 2 standard errors of the mean calculated from the sample. A standard error that is large in proportion to the mean indicates a high level of statistical instability; trending and projections against such estimates should be undertaken cautiously.

A median is the value which lies at the middle of a distribution: that is, 50% of the values are above it and 50% are below. It represents the “typical” response, and is not influenced by extreme values. For most distributions, the median will be either roughly equal to or significantly smaller than the mean.

Medians for grouped data are calculated by locating the group which contains the 50<sup>th</sup> percentile, then interpolating between the lower and upper bounds to estimate the precise value.

### About Readex Research

Readex Research is a nationally recognized independent research company located in Stillwater, MN. Its roots are in survey research for the magazine publishing industry, but specialization in conducting high-quality survey research (by mail and/or the Internet) has brought clients from many other markets, including associations, corporate marketers and communicators, and government agencies. Since its founding in 1947, Readex has completed thousands of surveys for a lengthy and diverse list of clients.

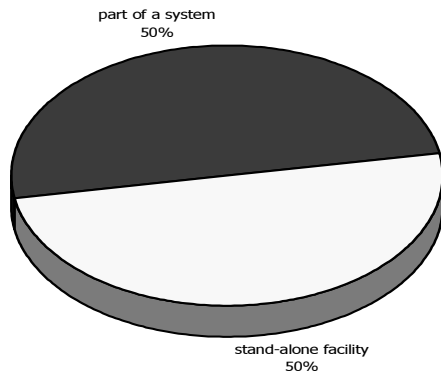
As a full-service survey research supplier, Readex provides in-house processing of all phases of each project (traditional mailing, broadcast emailing, and data processing) to ensure complete control over project quality and schedule. Analytical capabilities include a range of multivariate statistics and modeling techniques, in addition to the more traditional stub-and-banner tabulations.

This survey was conducted and this report was prepared by Readex in accordance with accepted research standards and practices. A complete report containing all survey results was provided to AHRA.



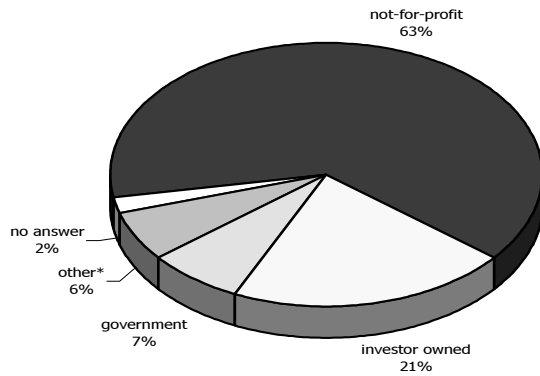
## FINDINGS: Facility and Procedures Profile

### Exhibit 01 Facility Type



base: 328 respondents

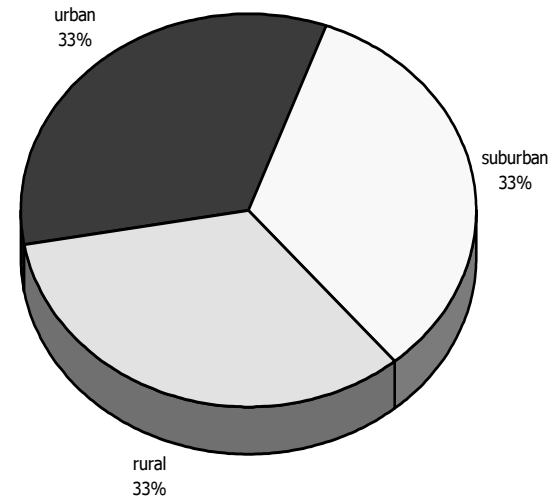
### Exhibit 02 Facility Owner



base: 328 respondents

\*Others include physician owned (5%) and others (2%)

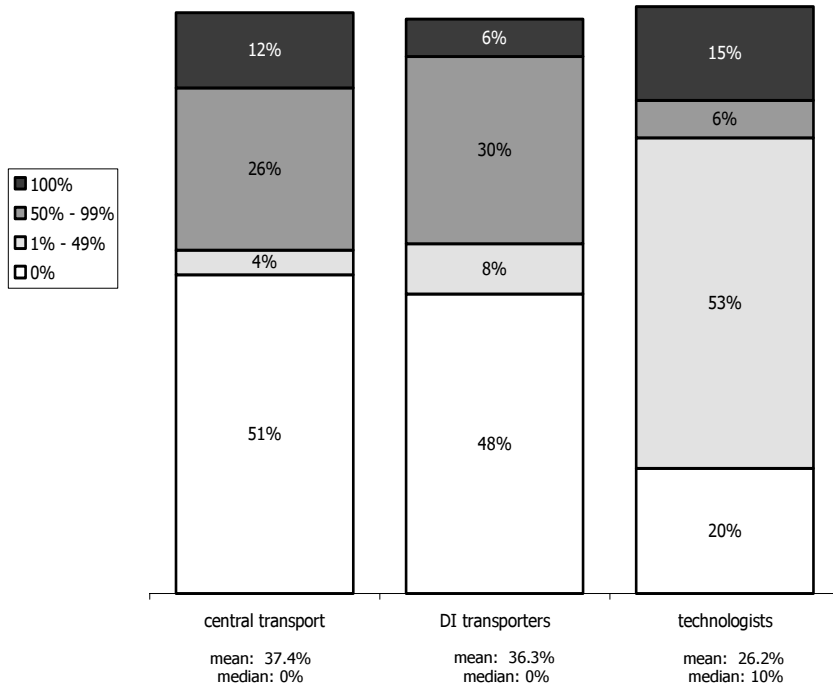
### Exhibit 03 Facility Setting



base: 328 respondents

## FINDINGS: Mobile Services and Transportation

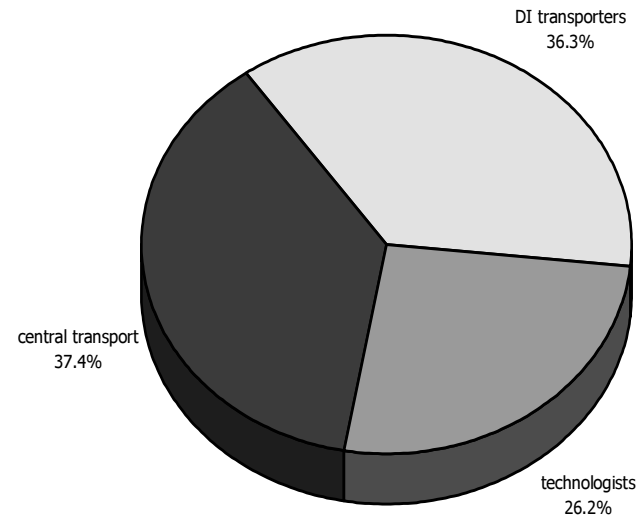
**Exhibit 33**  
**Percentage of Patients Transported by Entity**



base: 130 respondents providing transportation

note: mean and median are based on 121 answering respondents

**Exhibit 34**  
**Percentage of Patients Transported by Entity (on Average)**



base: 121 answering respondents providing transportation

## FINDINGS: Staffing Profile

### Exhibit 39

#### Number of FTEs by Position: General Radiography

|                                       | % with one or more | mean* | median* |
|---------------------------------------|--------------------|-------|---------|
| Radiology Administrative              | 33%                | 0.5   | 0       |
| Supervisory Technologist              | 52%                | 1.1   | 1       |
| Technologist                          | 93%                | 13.7  | 10      |
| Film/Image Library                    | 17%                | 0.5   | 0       |
| Transcriptionist                      | 11%                | 0.3   | 0       |
| Receptionist/Administrative Assistant | 34%                | 0.9   | 0       |
| Scheduler                             | 15%                | 0.5   | 0       |
| Radiology Darkroom Tech/Aide          | 10%                | 0.2   | 0       |
| Transporter                           | 17%                | 0.8   | 0       |
| Radiology Nurse                       | 13%                | 0.3   | 0       |
| PACS Administrator                    | 20%                | 0.2   | 0       |
| IS Department Support                 | 6%                 | 0.1   | 0       |

base: 298 respondents offering this specialty

\*base: 284 answering respondents offering this specialty

### Exhibit 40

#### Number of FTEs by Position: Ultrasound/Vascular Ultrasound

|                                       | % with one or more | mean* | median* |
|---------------------------------------|--------------------|-------|---------|
| Radiology Administrative              | 12%                | 0.1   | 0       |
| Supervisory Technologist              | 30%                | 0.4   | 0       |
| Technologist                          | 86%                | 4.3   | 3       |
| Film/Image Library                    | 1%                 | 0.0   | 0       |
| Transcriptionist                      | 0%                 | 0.0   | 0       |
| Receptionist/Administrative Assistant | 5%                 | 0.1   | 0       |
| Scheduler                             | 5%                 | 0.0   | 0       |
| Radiology Darkroom Tech/Aide          | 5%                 | 0.1   | 0       |
| Transporter                           | 3%                 | 0.0   | 0       |
| Radiology Nurse                       | 1%                 | 0.0   | 0       |
| PACS Administrator                    | 1%                 | 0.0   | 0       |
| IS Department Support                 | 0%                 | 0.0   | 0       |

base: 290 respondents offering this specialty

\*base: 272 answering respondents offering this specialty

# TABLES: Procedure Volume

## Procedure Volume: Mammography: Inpatient Procedures

By Organization Type, Number of Beds, Level 1 Trauma Center, Residents Train On Site, Use PACS, Region and Setting

|                         | n   | average | 25th percentile | 50th percentile | 75th percentile |
|-------------------------|-----|---------|-----------------|-----------------|-----------------|
| Total                   | 208 | 17      | 0               | 0               | 10              |
| Organization Type       |     |         |                 |                 |                 |
| NET: Hospital           | 166 | 21      | 0               | 3               | 17              |
| academic                | 12  | 81      | 0               | 38              | 104             |
| teaching                | 22  | 39      | 0               | 1               | 50              |
| community               | 132 | 13      | 0               | 3               | 11              |
| long term care          | 0   | --      | --              | --              | --              |
| pediatric               | 0   | --      | --              | --              | --              |
| rehabilitation          | 0   | --      | --              | --              | --              |
| NET: Non-Hospital       | 42  | 2       | 0               | 0               | 0               |
| radiologist practice    | 6   | 0       | 0               | 0               | 0               |
| imaging center          | 22  | 3       | 0               | 0               | 0               |
| mobile service          | 0   | --      | --              | --              | --              |
| multi-specialty         | 12  | 0       | 0               | 0               | 0               |
| primary care clinic     | 2   | --      | --              | --              | --              |
| Number of Beds          |     |         |                 |                 |                 |
| more than 200           | 71  | 40      | 0               | 6               | 50              |
| 200 or less             | 95  | 7       | 0               | 1               | 8               |
| Level 1 Trauma Center   |     |         |                 |                 |                 |
| yes                     | 26  | 63      | 0               | 16              | 64              |
| no                      | 172 | 11      | 0               | 0               | 10              |
| Residents Train On Site |     |         |                 |                 |                 |
| yes                     | 29  | 56      | 0               | 6               | 54              |
| no                      | 172 | 11      | 0               | 0               | 9               |
| Use PACS                |     |         |                 |                 |                 |
| yes                     | 196 | 18      | 0               | 0               | 10              |
| no                      | 9   | 6       | 0               | 1               | 14              |
| Region and Setting      |     |         |                 |                 |                 |
| New England             | 14  | 39      | 0               | 1               | 13              |
| urban                   | 4   | --      | --              | --              | --              |
| suburban                | 2   | --      | --              | --              | --              |
| rural                   | 8   | 52      | 0               | 1               | 9               |
| Middle Atlantic         | 22  | 19      | 0               | 1               | 21              |
| urban                   | 5   | 15      | 0               | 0               | 37              |
| suburban                | 9   | 13      | 0               | 0               | 28              |
| rural                   | 7   | 32      | 2               | 10              | 20              |

|                    | n  | average | 25th percentile | 50th percentile | 75th percentile |
|--------------------|----|---------|-----------------|-----------------|-----------------|
| Region and Setting |    |         |                 |                 |                 |
| East North Central | 36 | 34      | 0               | 2               | 32              |
| urban              | 10 | 86      | 0               | 20              | 135             |
| suburban           | 11 | 28      | 0               | 5               | 50              |
| rural              | 15 | 4       | 0               | 1               | 5               |
| West North Central | 22 | 6       | 0               | 0               | 7               |
| urban              | 5  | 6       | 0               | 0               | 16              |
| suburban           | 6  | 2       | 0               | 0               | 5               |
| rural              | 11 | 7       | 0               | 0               | 25              |
| South Atlantic     | 45 | 11      | 0               | 2               | 10              |
| urban              | 8  | 15      | 0               | 3               | 41              |
| suburban           | 16 | 6       | 0               | 0               | 15              |
| rural              | 19 | 15      | 0               | 3               | 8               |
| East South Central | 17 | 7       | 0               | 0               | 6               |
| urban              | 3  | --      | --              | --              | --              |
| suburban           | 5  | 3       | 0               | 0               | 7               |
| rural              | 9  | 6       | 0               | 0               | 1               |
| West South Central | 20 | 26      | 0               | 3               | 22              |
| urban              | 6  | 63      | 0               | 13              | 138             |
| suburban           | 6  | 12      | 0               | 2               | 23              |
| rural              | 8  | 9       | 0               | 4               | 9               |
| Mountain           | 13 | 3       | 0               | 1               | 5               |
| urban              | 3  | --      | --              | --              | --              |
| suburban           | 8  | 2       | 0               | 0               | 1               |
| rural              | 2  | --      | --              | --              | --              |
| Pacific            | 18 | 4       | 0               | 0               | 5               |
| urban              | 6  | 4       | 0               | 0               | 6               |
| suburban           | 8  | 4       | 0               | 1               | 8               |
| rural              | 4  | --      | --              | --              | --              |

NOTE: results not shown if fewer than 5 valid values

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# APPENDIX

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# APPENDIX

## Survey Instrument



**ahra**  
the association for medical  
imaging management

**2009 Staff Utilization Survey**

You may have been contacted earlier this month by AHRA for a different survey on compensation and benefits. This survey addresses new topics, specifically those related to staffing at your facility. Whether or not you completed the first survey, your participation in this current survey is desired and very important to the success of the study.

To assist AHRA: The Association for Medical Imaging Management in providing you with vital industry information, please provide your candid answers to the following questions. All responses will be treated in confidence and used only in tabulation with others.

In appreciation for your assistance, all those completing the survey have the option of receiving a FREE copy of the survey report when it is published. (Publication will be sent as a PDF.)

Since the number of individuals responding to this survey represents a sample, each response is very important to the success of the effort. All responses are confidential and will be aggregated for analysis.

Questions are laid out across several pages. Clicking NEXT>> will bring you to the next page; clicking SUBMIT on the final page will upload your answers. If you need to stop and return to the survey later, click the PAUSE button. To return, point your browser to <http://www.readexsurvey.net/ahrastaff/> and re-enter your password.

When you are done, click SUBMIT on the final page to upload your answers.

Please enter your password and click NEXT >> to continue.

Please enter your password.  
Note that this is a special password created specifically for the purpose of completing this survey, and may be found in your original e-mail invitation.


If you prefer to fill out the survey on paper and mail it back, please [click here](#) for the printable version.

Thank you, we appreciate your thoughtful assistance.

For technical difficulties while taking this survey, please contact:  
Dan Brust  
+1 861 439 8216  
[rsurveyhelp@readexresearch.com](mailto:rsurveyhelp@readexresearch.com)

For questions related to the survey, please contact:  
Emily Douire  
AHRA Assistant Editor  
[edouire@ahraonline.org](mailto:edouire@ahraonline.org)

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**2009 Staff Utilization Survey**

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Please enter your password:  
Note that this is a special password created specifically for the purpose of completing this survey, and may be found in your original e-mail invitation.

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**About your facility**

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The following questions are about the facility where you work, that is the **one location** you consider to be your primary employment location. Please answer for this single location and NOT for your entire organization (if it includes multiple locations).

**1. Which one of the following best describes your facility?**

part of a system  
 stand-alone facility

---

**2. Which one of the following best describes who owns your facility?**  
(please select only one option)

government  
 not-for-profit  
 investor owned  
 other (please specify)

---

**3. Which of the following best describes the primary mission or purpose of your facility?**  
(please select only one option)

**HOSPITAL**

academic (featuring research positions and fellowships)  
 teaching (featuring residency programs)  
 community  
 long term care  
 pediatric  
 rehabilitation

**NON-HOSPITAL**

radiologist practice  
 imaging center  
 mobile service  
 multi-specialty physician office (not radiology)  
 primary care clinic

# APPENDIX

3a. If you indicated your facility is hospital-based, approximately how many beds does it have?

100 or less  
 101 - 200  
 201 - 300  
 301 - 400  
 401 - 500  
 more than 500  
 not applicable, not hospital-based

3b. Is your facility a Level 1 trauma center?

yes  
 no

3c. Do radiology residents train at your facility?

yes  
 no

---

4. In what state is your facility located?  
(please select only one option)  
<select one>

---

5. Which best describes the setting in which your facility is located?  
(please select only one option)

urban  
 suburban  
 rural

---

6. Which of the following imaging specialties were offered at your facility during its most recently completed fiscal year? (please select all that apply)

|  |   |
|--|---|
| <input type="checkbox"/> general radiography                   | <input type="checkbox"/> radiation therapy          |
| <input type="checkbox"/> CT                                    | <input type="checkbox"/> mammography                |
| <input type="checkbox"/> PET                                   | <input type="checkbox"/> interventional angiography |
| <input type="checkbox"/> ultrasound and/or vascular ultrasound | <input type="checkbox"/> cardiac cath radiology     |
| <input type="checkbox"/> nuclear medicine                      | <input type="checkbox"/> none of these              |
| <input type="checkbox"/> MRI                                   |   |

---

**About staffing and procedures at your facility**

The next several questions ask about the number of full-time equivalents (FTEs) working in the various specialties offered by your facility.

First, please consider those primarily dedicated to *administration*. That is, those not dedicated to any specialty; rather they are in an overall administrative role in medical imaging. (FTEs working in each specialty will be accounted for in a later question.)

7a. How many paid (not worked) full time equivalents (FTEs) does your facility currently have dedicated to *administration*? Please include current staff only, NOT approved budgeted staff.

FTEs are considered to work 40 or more hours per week, or 2,080 hours per year. Please do NOT include any temporary staff (whether they be full or part time). However, do include overtime FTEs. (please fill in a number below)

# \_\_\_\_\_ FTEs dedicated to administration

7b. Of the paid FTEs dedicated to *administration* how many are in each of the following positions/job titles? Please count each individual only once. If their duties are spread across multiple positions, please answer for the position in which they spend the majority of their time. (please enter a number for each purpose below; if none, enter "0")

Radiology Administrative FTEs (i.e., Director, Manager, Supervisor, etc.)  
 Supervisory Technologist FTEs  
 Technologist FTEs  
 Film/Image Library FTEs  
 Transcriptionist FTEs  
 Receptionist/Administrative Assistant FTEs  
 Scheduler FTEs  
 Radiology Darkroom Tech/Aide FTEs  
 Transporter FTEs  
 Radiology Nurse FTEs  
 PACS Administrator FTEs  
 IS Department Support FTEs  
 = TOTAL NUMBER OF FTEs IN ADMINISTRATION (should equal answer to question 7a)

---

8. Do supervisory technologists in *administration* at your facility perform procedures, in addition to any administrative duties?

yes  
 no ... if no, please click here to skip to question 9

---

8a. If yes, what percentage of their time is spent performing procedures and what percentage is spent in administrative duties?  
(please enter a percentage in each category below, sum total should equal 100%)

\_\_\_\_\_ % of time spent performing procedures  
 \_\_\_\_\_ % of time spent in administrative duties  
 \_\_\_\_\_ = % TOTAL WORKING TIME (should equal 100%)

---

Please answer Questions 9 through 15 for each specialty you indicated at question 6.

9. Is there a technologist training program in *administration* at your facility (including affiliations)? That is, the training program is specific to imaging administration?

yes  
 no ... if no, please click here to skip to question 13a

---

10. If yes, is the program sponsored by your facility or is it affiliated with a school?

sponsored by facility  
 affiliated with a school

---

11. How many students are currently enrolled in your technologist training program in *administration*? (please enter a number below)

# \_\_\_\_\_ students enrolled in your facility's training program in administration

---

12. How many FTE clinical instructors are employed in your technologist training program in *administration*? (please enter a number below)

# \_\_\_\_\_ FTE clinical instructors in your facility's training program in administration

# APPENDIX

(Questions 13 through 24 will be shown consecutively for each specialty indicated at question 6)

Please consider your facility's operations dedicated to:

**General Radiography**

13a. How many paid (not worked) full time equivalents (FTEs) does your facility currently have dedicated to general radiography? Please include current staff only. NOT approved budgeted staff.

FTEs are considered to work 40 or more hours per week, or 2,080 hours per year. Please do NOT include any temporary staff (whether they be full or part time). However, do include overtime FTEs. (Please fill in a number below).

# FTEs dedicated to this specialty

13b. Of the paid FTEs dedicated to general radiography how many are in each of the following positions/job titles? Please count each individual only once. If their duties are spread across multiple positions, please answer for the position in which they spend the majority of their time. (Please enter a number for each purpose below; if none, enter "0")

- # Radiology Administrative FTEs (i.e., Director, Manager, Supervisor, etc.)
- # Supervisory Technologist FTEs
- # Technologist FTEs
- # Film/Image Library FTEs
- # Transcriptionist FTEs
- # Receptionist/Administrative Assistant FTEs
- # Scheduler FTEs
- # Radiology Darkroom Tech/Aide FTEs
- # Transporter FTEs
- # Radiology Nurse FTEs
- # PACS Administrator FTEs
- # IS Department Support FTEs
- # = TOTAL NUMBER OF FTEs IN THIS SPECIALTY (should equal answer to question 7a)

---

14. Do you consider your facility's general radiography department to be fully staffed?

yes

no

15. Generally speaking, for how many hours is your facility's general radiography department staffed by onsite technologists during the following days? (Please enter the number of hours in each category below; if none, enter "0")

- # number of hours on weekdays (Monday - Friday)
- # number of hours on Saturday
- # number of hours on Sunday

---

16. Do supervisory technologists in general radiography at your facility perform procedures, in addition to any administrative duties?

yes

no

16a. If yes, what percentage of their time is spent performing procedures and what percentage is spent in administrative duties? (Please enter a percentage in each category below; sum total should equal 100%)

% of time spent performing procedures

% of time spent in administrative duties

= % TOTAL WORKING TIME (should equal 100%)

17. What percentage of the patient population at your facility in general radiography have conscious sedation? (Please fill in a number below; if none, enter "0").

% of patients in this specialty with conscious sedation

---

18. What percentage of the total procedures performed at your facility in general radiography are performed on patients under 18 years of age? (Please fill in a number below; if none, enter "0")

% of procedures in this specialty performed on patients under 18 years of age

---

19. What percentage of the total procedures performed at your facility in general radiography are performed on patients under 5 years of age? (Please fill in a number below; if none, enter "0")

% of procedures in this specialty performed on patients under 5 years of age

---

20. Is there a technologist training program in general radiography at your facility (including affiliations)? Training may include rotations through various modalities.

yes

no

21. If yes, is the program sponsored by your facility or is it affiliated with a school?

sponsored by facility

affiliated with a school

---

22. How many students are currently enrolled in your technologist training program in general radiography? (Please enter a number below; if none, enter "0")

# students enrolled in your facility's training program for this specialty

---

23. How many FTE clinical instructors are employed in your technologist training program in general radiography? (Please enter a number below)

# FTE clinical instructors in your facility's training program for this specialty

---

24. Approximately how many general radiography imaging procedures and exams did your facility perform in each of the following areas in your facility's most recently completed fiscal year?

Please answer for the number of procedures NOT the number of patients. For example, if a total of 300 procedures were performed during the treatment of 100 patients, the answer would be 300. To calculate procedure volume, please count procedures as CPT codes. (Please fill in a number for each; if none, fill in "0". The sum total of all three categories should equal the number of all imaging procedures and exams performed by your facility during its most recently completed fiscal year.)

- # inpatient procedures and exams
- # outpatient procedures and exams
- # emergency room procedures and exams
- # = TOTAL NUMBER OF IMAGING PROCEDURES AND EXAMS IN THIS SPECIALTY

---

(Questions 13 through 24 will be shown consecutively for each specialty indicated at question 6)

Please consider your facility's operations dedicated to:

**CT**

13a. How many paid (not worked) full time equivalents (FTEs) does your facility currently have dedicated to CT? Please include current staff only. NOT approved budgeted staff.

FTEs are considered to work 40 or more hours per week, or 2,080 hours per year. Please do NOT include any temporary staff (whether they be full or part time). However, do include overtime FTEs. (Please fill in a number below)

# FTEs dedicated to this specialty



# APPENDIX

**13b. Of the paid FTEs dedicated to CT how many are in each of the following positions/job titles? Please count each individual only once. If their duties are spread across multiple positions, please answer for the position in which they spend the majority of their time. (please enter a number for each purpose below; if none, enter "0")**

- # Radiology Administrative FTEs (i.e., Director, Manager, Supervisor, etc.)
- # Supervisory Technologist FTEs
- # Technologist FTEs
- # Film/Image Library FTEs
- # Transcriptionist FTEs
- # Receptionist/Administrative Assistant FTEs
- # Scheduler FTEs
- # Radiology Darkroom Tech/Aide FTEs
- # Transporter FTEs
- # Radiology Nurse FTEs
- # PACS Administrator FTEs
- # IS Department Support FTEs
- # = TOTAL NUMBER OF FTEs IN THIS SPECIALTY (should equal answer to question 7a)

---

**14. Do you consider your facility's CT department to be fully staffed?**

yes

no

---

**15. Generally speaking, for how many hours is your facility's CT department staffed by onsite technologists during the following days? (please enter the number of hours in each category below; if none, enter "0")**

- # number of hours on weekdays (Monday - Friday)
- # number of hours on Saturday
- # number of hours on Sunday

---

**16. Do supervisory technologists in CT at your facility perform procedures, in addition to any administrative duties?**

yes

no ... if no, please click here to skip to question 17

---

**16a. If yes, what percentage of their time is spent performing procedures and what percentage is spent in administrative duties? (please enter a percentage in each category below; sum total should equal 100%)**

- % of time spent performing procedures
- % of time spent in administrative duties
- # = % TOTAL WORKING TIME (should equal 100%)

---

**17. What percentage of the patient population at your facility in CT have conscious sedation? (please fill in a number below; if none, enter "0")**

% of patients in this specialty with conscious sedation

---

**18. What percentage of the total procedures performed at your facility in CT are performed on patients under 18 years of age? (please fill in a number below; if none, enter "0")**

% of procedures in this specialty performed on patients under 18 years of age

---

**19. What percentage of the total procedures performed at your facility in CT are performed on patients under 5 years of age? (please fill in a number below; if none, enter "0")**

% of procedures in this specialty performed on patients under 5 years of age

---

**20. Is there a technologist training program in CT at your facility (including affiliations)?**

yes

no ... if no, please click here to skip to question 24

**21. If yes, is the program sponsored by your facility or is it affiliated with a school?**

sponsored by facility

affiliated with a school

---

**22. How many students are currently enrolled in your technologist training program in CT? (please enter a number below; if none, enter "0")**

# students enrolled in your facility's training program for this specialty

---

**23. How many FTE clinical instructors are employed in your technologist training program in CT? (please enter a number below)**

# FTE clinical instructors in your facility's training program for this specialty

---

**24. Approximately how many CT imaging procedures and exams did your facility perform in each of the following areas in your facility's most recently completed fiscal year?**

Please answer for the number of procedures NOT the number of patients. For example, if a total of 300 procedures were performed during the treatment of 100 patients, the answer would be 300. To calculate procedure volume, please count procedures as CPT codes. (please fill in a number for each; if none, fill in "0". The sum total of all three categories should equal the number of all imaging procedures and exams performed by your facility during its most recently completed fiscal year.)

- # inpatient procedures and exams
- # outpatient procedures and exams
- # emergency room procedures and exams
- # = TOTAL NUMBER OF IMAGING PROCEDURES AND EXAMS IN THIS SPECIALTY

---

(Questions 13 through 24 will be shown consecutively for each specialty indicated at question 6)

Please consider your facility's operations dedicated to:

PET

**13a. How many paid (not worked) full time equivalents (FTEs) does your facility currently have dedicated to PET? Please include current staff only, NOT approved budgeted staff.**

FTEs are considered to work 40 or more hours per week, or 2,080 hours per year. Please do NOT include any temporary staff (whether they be full or part time). However, do include overtime FTEs. (please fill in a number below)

# FTEs dedicated to this specialty

---

**13b. Of the paid FTEs dedicated to PET how many are in each of the following positions/job titles? Please count each individual only once. If their duties are spread across multiple positions, please answer for the position in which they spend the majority of their time. (please enter a number for each purpose below; if none, enter "0")**

- # Radiology Administrative FTEs (i.e., Director, Manager, Supervisor, etc.)
- # Supervisory Technologist FTEs
- # Technologist FTEs
- # Film/Image Library FTEs
- # Transcriptionist FTEs
- # Receptionist/Administrative Assistant FTEs
- # Scheduler FTEs
- # Radiology Darkroom Tech/Aide FTEs
- # Transporter FTEs
- # Radiology Nurse FTEs
- # PACS Administrator FTEs
- # IS Department Support FTEs
- # = TOTAL NUMBER OF FTEs IN THIS SPECIALTY (should equal answer to question 7a)

# APPENDIX

14. Do you consider your facility's PET department to be fully staffed?

yes  
 no

---

15. Generally speaking, for how many hours is your facility's PET department staffed by onsite technologists during the following days? (please enter the number of hours in each category below; if none, enter "0")

# number of hours on weekdays (Monday - Friday)  
# number of hours on Saturday  
# number of hours on Sunday

---

16. Do supervisory technologists in PET at your facility perform procedures, in addition to any administrative duties?

yes  
 no ... if no, please click here to skip to question 17

---

16a. If yes, what percentage of their time is spent performing procedures and what percentage is spent in administrative duties? (please enter a percentage in each category below; sum total should equal 100%)

% of time spent performing procedures  
% of time spent in administrative duties  
= % TOTAL WORKING TIME (should equal 100%)

---

17. What percentage of the patient population at your facility in PET have conscious sedation? (please fill in a number below; if none, enter "0")

% of patients in this specialty with conscious sedation

---

18. What percentage of the total procedures performed at your facility in PET are performed on patients under 18 years of age? (please fill in a number below; if none, enter "0")

% of procedures in this specialty performed on patients under 18 years of age

---

19. What percentage of the total procedures performed at your facility in PET are performed on patients under 5 years of age? (please fill in a number below; if none, enter "0")

% of procedures in this specialty performed on patients under 5 years of age

---

20. Is there a technologist training program in PET at your facility (including affiliations)?

yes  
 no ... if no, please click here to skip to question 24

---

21. If yes, is the program sponsored by your facility or is it affiliated with a school?

sponsored by facility  
 affiliated with a school

---

22. How many students are currently enrolled in your technologist training program in PET? (please enter a number below; if none, enter "0")

# students enrolled in your facility's training program for this specialty

---

23. How many FTE clinical instructors are employed in your technologist training program in PET? (please enter a number below)

# FTE clinical instructors in your facility's training program for this specialty

24. Approximately how many PET imaging procedures and exams did your facility perform in each of the following areas in your facility's most recently completed fiscal year?

Please answer for the number of procedures NOT the number of patients. For example, if a total of 300 procedures were performed during the treatment of 100 patients, the answer would be 300. To calculate procedure volume, please count procedures as CPT codes. (please fill in a number for each; if none, fill in "0". The sum total of all three categories should equal the number of all imaging procedures and exams performed by your facility during its most recently completed fiscal year.)

# inpatient procedures and exams  
# outpatient procedures and exams  
# emergency room procedures and exams  
# = TOTAL NUMBER OF IMAGING PROCEDURES AND EXAMS IN THIS SPECIALTY

---

(Questions 13 through 24 will be shown consecutively for each specialty indicated at question 6)

Please consider your facility's operations dedicated to:

Ultrasound and/or Vascular Ultrasound

13a. How many paid (not worked) full time equivalents (FTEs) does your facility currently have dedicated to ultrasound and/or vascular ultrasound? Please include current staff only, NOT approved budgeted staff.

FTEs are considered to work 40 or more hours per week, or 2,080 hours per year. Please do NOT include any temporary staff (whether they be full or part time). However, do include overtime FTEs. (please fill in a number below)

# FTEs dedicated to this specialty

---

13b. Of the paid FTEs dedicated to ultrasound and/or vascular ultrasound how many are in each of the following positions/job titles? Please count each individual only once. If their duties are spread across multiple positions, please answer for the position in which they spend the majority of their time. (please enter a number for each purpose below; if none, enter "0")

# Radiology Administrative FTEs (i.e., Director, Manager, Supervisor, etc.)  
# Supervisory Technologist FTEs  
# Technologist FTEs  
# Film/Image Library FTEs  
# Transcriptionist FTEs  
# Receptionist/Administrative Assistant FTEs  
# Scheduler FTEs  
# Radiology Darkroom Tech/Aide FTEs  
# Transporter FTEs  
# Radiology Nurse FTEs  
# PACS Administrator FTEs  
# IS Department Support FTEs  
# = TOTAL NUMBER OF FTEs IN THIS SPECIALTY (should equal answer to question 7a)

---

14. Do you consider your facility's ultrasound and/or vascular ultrasound department to be fully staffed?

yes  
 no

---

15. Generally speaking, for how many hours is your facility's ultrasound and/or vascular ultrasound department staffed by onsite technologists during the following days? (please enter the number of hours in each category below; if none, enter "0")

# number of hours on weekdays (Monday - Friday)  
# number of hours on Saturday  
# number of hours on Sunday

# APPENDIX

16. Do supervisory technologists in *ultrasound and/or vascular ultrasound* at your facility perform procedures, in addition to any administrative duties?

yes  
 no ... if no, please click [here](#) to skip to question 17

16a. If yes, what percentage of their time is spent performing procedures and what percentage is spent in administrative duties? (please enter a percentage in each category below; sum total should equal 100%)

% of time spent performing procedures  
 % of time spent in administrative duties  
 = % TOTAL WORKING TIME (should equal 100%)

---

17. What percentage of the patient population at your facility in *ultrasound and/or vascular ultrasound* have conscious sedation? (please fill in a number below; if none, enter "0")

% of patients in this specialty with conscious sedation

---

18. What percentage of the total procedures performed at your facility in *ultrasound and/or vascular ultrasound* are performed on patients under 16 years of age? (please fill in a number below; if none, enter "0")

% of procedures in this specialty performed on patients under 16 years of age

---

19. What percentage of the total procedures performed at your facility in *ultrasound and/or vascular ultrasound* are performed on patients under 5 years of age? (please fill in a number below; if none, enter "0")

% of procedures in this specialty performed on patients under 5 years of age

---

20. Is there a technologist training program in *ultrasound and/or vascular ultrasound* at your facility (including affiliations)?

yes  
 no ... if no, please click [here](#) to skip to question 24

21. If yes, is the program sponsored by your facility or is it affiliated with a school?

sponsored by facility  
 affiliated with a school

---

22. How many students are currently enrolled in your technologist training program in *ultrasound and/or vascular ultrasound*? (please enter a number below; if none, enter "0")

# students enrolled in your facility's training program for this specialty

---

23. How many FTE clinical instructors are employed in your technologist training program in *ultrasound and/or vascular ultrasound*? (please enter a number below)

# FTE clinical instructors in your facility's training program for this specialty

---

24. Approximately how many *ultrasound and/or vascular ultrasound* imaging procedures and exams did your facility perform in each of the following areas in your facility's most recently completed fiscal year?

Please answer for the number of procedures NOT the number of patients. For example, if a total of 300 procedures were performed during the treatment of 180 patients, the answer would be 300. To calculate procedure volume, please count procedures as CPT codes. (please fill in a number for each; if none, fill in "0". The sum total of all three categories should equal the number of all imaging procedures and exams performed by your facility during its most recently completed fiscal year.)

# inpatient procedures and exams  
 # outpatient procedures and exams  
 # emergency room procedures and exams  
 # = TOTAL NUMBER OF IMAGING PROCEDURES AND EXAMS IN THIS SPECIALTY

(Questions 13 through 24 will be shown consecutively for each specialty indicated at question 6)

Please consider your facility's operations dedicated to:

**Nuclear Medicine**

13a. How many paid (not worked) full time equivalents (FTEs) does your facility currently have dedicated to *nuclear medicine*? Please include current staff only, NOT approved budgeted staff.

FTEs are considered to work 40 or more hours per week, or 2,080 hours per year. Please do NOT include any temporary staff (whether they be full or part time). However, do include overtime FTEs. (please fill in a number below)

# FTEs dedicated to this specialty

13b. Of the paid FTEs dedicated to *nuclear medicine* how many are in each of the following positions/job titles? Please count each individual only once. If their duties are spread across multiple positions, please answer for the position in which they spend the majority of their time. (please enter a number for each purpose below; if none, enter "0")

# Radiology Administrative FTEs (i.e., Director, Manager, Supervisor, etc.)  
 # Supervisory Technologist FTEs  
 # Technologist FTEs  
 # Film/Image Library FTEs  
 # Transcriptionist FTEs  
 # Receptionist/Administrative Assistant FTEs  
 # Scheduler FTEs  
 # Radiology Darkroom Tech/Aide FTEs  
 # Transporter FTEs  
 # Radiology Nurse FTEs  
 # PACS Administrator FTEs  
 # IS Department Support FTEs  
 # = TOTAL NUMBER OF FTEs IN THIS SPECIALTY (should equal answer to question 7a)

---

14. Do you consider your facility's *nuclear medicine* department to be fully staffed?

yes  
 no

---

15. Generally speaking, for how many hours is your facility's *nuclear medicine* department staffed by onsite technologists during the following days? (please enter the number of hours in each category below; if none, enter "0")

# number of hours on weekdays (Monday - Friday)  
 # number of hours on Saturday  
 # number of hours on Sunday

---

16. Do supervisory technologists in *nuclear medicine* at your facility perform procedures, in addition to any administrative duties?

yes  
 no ... if no, please click [here](#) to skip to question 17

16a. If yes, what percentage of their time is spent performing procedures and what percentage is spent in administrative duties? (please enter a percentage in each category below; sum total should equal 100%)

% of time spent performing procedures  
 % of time spent in administrative duties  
 = % TOTAL WORKING TIME (should equal 100%)

---

17. What percentage of the patient population at your facility in *nuclear medicine* have conscious sedation? (please fill in a number below; if none, enter "0")

% of patients in this specialty with conscious sedation

# APPENDIX

(Questions 13 through 24 will be shown consecutively for each specialty indicated at question 6)

Please consider your facility's operations dedicated to:

**General Radiography**

13a. How many paid (not worked) full time equivalents (FTEs) does your facility currently have dedicated to general radiography? Please include current staff only, NOT approved budgeted staff.

FTEs are considered to work 40 or more hours per week, or 2,080 hours per year. Please do NOT include any temporary staff (whether they be full or part time). However, do include overtime FTEs. (please fill in a number below).

# FTEs dedicated to this specialty

13b. Of the paid FTEs dedicated to general radiography how many are in each of the following positions/job titles? Please count each individual only once. If their duties are spread across multiple positions, please answer for the position in which they spend the majority of their time. (please enter a number for each purpose below; if none, enter "0")

- # Radiology Administrative FTEs (i.e., Director, Manager, Supervisor, etc.)
- # Supervisory Technologist FTEs
- # Technologist FTEs
- # Film/Image Library FTEs
- # Transcriptionist FTEs
- # Receptionist/Administrative Assistant FTEs
- # Scheduler FTEs
- # Radiology Darkroom Tech/Aide FTEs
- # Transporter FTEs
- # Radiology Nurse FTEs
- # PACS Administrator FTEs
- # IS Department Support FTEs
- # = TOTAL NUMBER OF FTEs IN THIS SPECIALTY (should equal answer to question 7a)

14. Do you consider your facility's general radiography department to be fully staffed?

yes  
 no

15. Generally speaking, for how many hours is your facility's general radiography department staffed by onsite technologists during the following days? (please enter the number of hours in each category below; if none, enter "0")

- # number of hours on weekdays (Monday - Friday)
- # number of hours on Saturday
- # number of hours on Sunday

16. Do supervisory technologists in general radiography at your facility perform procedures, in addition to any administrative duties?

yes  
 no ... if no, please click here to skip to question 17

16a. If yes, what percentage of their time is spent performing procedures and what percentage is spent in administrative duties? (please enter a percentage in each category below; sum total should equal 100%)

% of time spent performing procedures  
% of time spent in administrative duties  
= % TOTAL WORKING TIME (should equal 100%)

17. What percentage of the patient population at your facility in general radiography have conscious sedation? (please fill in a number below; if none, enter "0")

% of patients in this specialty with conscious sedation

18. What percentage of the total procedures performed at your facility in general radiography are performed on patients under 18 years of age? (please fill in a number below; if none, enter "0")

% of procedures in this specialty performed on patients under 18 years of age

19. What percentage of the total procedures performed at your facility in general radiography are performed on patients under 5 years of age? (please fill in a number below; if none, enter "0")

% of procedures in this specialty performed on patients under 5 years of age

20. Is there a technologist training program in general radiography at your facility (including affiliations)? Training may include rotations through various modalities.

yes  
 no ... if no, please click here to skip to question 24

21. If yes, is the program sponsored by your facility or is it affiliated with a school?

sponsored by facility  
 affiliated with a school

22. How many students are currently enrolled in your technologist training program in general radiography? (please enter a number below; if none, enter "0")

# students enrolled in your facility's training program for this specialty

23. How many FTE clinical instructors are employed in your technologist training program in general radiography? (please enter a number below)

# FTE clinical instructors in your facility's training program for this specialty

24. Approximately how many general radiography imaging procedures and exams did your facility perform in each of the following areas in your facility's most recently completed fiscal year?

Please answer for the number of procedures NOT the number of patients. For example, if a total of 300 procedures were performed during the treatment of 100 patients, the answer would be 300. To calculate procedure volume, please count procedures as CPT codes. (please fill in a number for each; if none, fill in "0". The sum total of all three categories should equal the number of all imaging procedures and exams performed by your facility during its most recently completed fiscal year.)

- # inpatient procedures and exams
- # outpatient procedures and exams
- # emergency room procedures and exams
- # = TOTAL NUMBER OF IMAGING PROCEDURES AND EXAMS IN THIS SPECIALTY

(Questions 13 through 24 will be shown consecutively for each specialty indicated at question 6)

Please consider your facility's operations dedicated to:

**CT**

13a. How many paid (not worked) full time equivalents (FTEs) does your facility currently have dedicated to CT? Please include current staff only, NOT approved budgeted staff.

FTEs are considered to work 40 or more hours per week, or 2,080 hours per year. Please do NOT include any temporary staff (whether they be full or part time). However, do include overtime FTEs. (please fill in a number below)

# FTEs dedicated to this specialty

14. Do you consider your facility's MRI department to be fully staffed?

yes  
 no

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15. Generally speaking, for how many hours is your facility's MRI department staffed by onsite technologists during the following days? (please enter the number of hours in each category below, if none, enter "0")

# number of hours on weekdays (Monday - Friday)  
 # number of hours on Saturday  
 # number of hours on Sunday

---

16. Do supervisory technologists in MRI at your facility perform procedures, in addition to any administrative duties?

yes  
 no ... if no, please click here to skip to question 17

---

16a. If yes, what percentage of their time is spent performing procedures and what percentage is spent in administrative duties? (please enter a percentage in each category below, sum total should equal 100%)

% of time spent performing procedures  
 % of time spent in administrative duties  
 = % TOTAL WORKING TIME (should equal 100%)

---

17. What percentage of the patient population at your facility in MRI have conscious sedation? (please fill in a number below; if none, enter "0")

% of patients in this specialty with conscious sedation

---

18. What percentage of the total procedures performed at your facility in MRI are performed on patients under 18 years of age? (please fill in a number below; if none, enter "0")

% of procedures in this specialty performed on patients under 18 years of age

---

19. What percentage of the total procedures performed at your facility in MRI are performed on patients under 5 years of age? (please fill in a number below; if none, enter "0")

% of procedures in this specialty performed on patients under 5 years of age

---

20. Is there a technologist training program in MRI at your facility (including affiliations)?

yes  
 no ... if no, please click here to skip to question 24

---

21. If yes, is the program sponsored by your facility or is it affiliated with a school?

sponsored by facility  
 affiliated with a school

---

22. How many students are currently enrolled in your technologist training program in MRI? (please enter a number below; if none, enter "0")

# students enrolled in your facility's training program for this specialty

---

23. How many FTE clinical instructors are employed in your technologist training program in MRI? (please enter a number below)

# FTE clinical instructors in your facility's training program for this specialty

24. Approximately how many MRI imaging procedures and exams did your facility perform in each of the following areas in your facility's most recently completed fiscal year?

Please answer for the number of procedures NOT the number of patients. For example, if a total of 300 procedures were performed during the treatment of 100 patients, the answer would be 300. To calculate procedure volume, please count procedures as CPT codes. (please fill in a number for each; if none, fill in "0". The sum total of all three categories should equal the number of all imaging procedures and exams performed by your facility during its most recently completed fiscal year.)

# inpatient procedures and exams  
 # outpatient procedures and exams  
 # emergency room procedures and exams  
 # = TOTAL NUMBER OF IMAGING PROCEDURES AND EXAMS IN THIS SPECIALTY

---

(Questions 13 through 24 will be shown consecutively for each specialty indicated at question 6)

Please consider your facility's operations dedicated to:

Radiation Therapy

13a. How many paid (not worked) full time equivalents (FTEs) does your facility currently have dedicated to radiation therapy? Please include current staff only, NOT approved budgeted staff.

FTEs are considered to work 40 or more hours per week, or 2,080 hours per year. Please do NOT include any temporary staff (whether they be full or part time). However, do include overtime FTEs. (please fill in a number below)

# FTEs dedicated to this specialty

---

13b. Of the paid FTEs dedicated to radiation therapy how many are in each of the following positions/job titles? Please count each individual only once. If their duties are spread across multiple positions, please answer for the position in which they spend the majority of their time. (please enter a number for each purpose below, if none, enter "0")

# Radiology Administrative FTEs (i.e., Director, Manager, Supervisor, etc.)  
 # Supervisory Technologist FTEs  
 # Technologist FTEs  
 # Film/Image Library FTEs  
 # Transcriptionist FTEs  
 # Receptionist/Administrative Assistant FTEs  
 # Scheduler FTEs  
 # Radiology Darkroom Tech/Aide FTEs  
 # Transporter FTEs  
 # Radiology Nurse FTEs  
 # PACS Administrator FTEs  
 # IS Department Support FTEs  
 # = TOTAL NUMBER OF FTEs IN THIS SPECIALTY (should equal answer to question 7a)

---

14. Do you consider your facility's radiation therapy department to be fully staffed?

yes  
 no

---

15. Generally speaking, for how many hours is your facility's radiation therapy department staffed by onsite technologists during the following days? (please enter the number of hours in each category below; if none, enter "0")

# number of hours on weekdays (Monday - Friday)  
 # number of hours on Saturday  
 # number of hours on Sunday

# APPENDIX

16. Do supervisory technologists in radiation therapy at your facility perform procedures, in addition to any administrative duties?

yes  
 no ... If no, please click [here](#) to skip to question 17

16a. If yes, what percentage of their time is spent performing procedures and what percentage is spent in administrative duties? (please enter a percentage in each category below, sum total should equal 100%)

% of time spent performing procedures \_\_\_\_\_  
 % of time spent in administrative duties \_\_\_\_\_  
 = % TOTAL WORKING TIME (should equal 100%)

---

17. What percentage of the patient population at your facility in radiation therapy have conscious sedation? (please fill in a number below; if none, enter "0")

% of patients in this specialty with conscious sedation \_\_\_\_\_

---

18. What percentage of the total procedures performed at your facility in radiation therapy are performed on patients under 18 years of age? (please fill in a number below; if none, enter "0")

% of procedures in this specialty performed on patients under 18 years of age \_\_\_\_\_

---

19. What percentage of the total procedures performed at your facility in radiation therapy are performed on patients under 5 years of age? (please fill in a number below; if none, enter "0")

% of procedures in this specialty performed on patients under 5 years of age \_\_\_\_\_

---

20. Is there a technologist training program in radiation therapy at your facility (including affiliations)?

yes  
 no ... If no, please click [here](#) to skip to question 24

21. If yes, is the program sponsored by your facility or is it affiliated with a school?

sponsored by facility  
 affiliated with a school

---

22. How many students are currently enrolled in your technologist training program in radiation therapy? (please enter a number below; if none, enter "0")

# students enrolled in your facility's training program for this specialty \_\_\_\_\_

---

23. How many FTE clinical instructors are employed in your technologist training program in radiation therapy? (please enter a number below)

# FTE clinical instructors in your facility's training program for this specialty \_\_\_\_\_

---

24a. Approximately how many radiation therapy imaging procedures and exams did your facility perform in each of the following areas in your facility's most recently completed fiscal year?

**RADIATION THERAPY TREATMENTS**

Please answer for the number of procedures NOT the number of patients. For example, if a total of 300 procedures were performed during the treatment of 100 patients, the answer would be 300. To calculate procedure volume, please count procedures as CPT codes. (please fill in a number for each; if none, fill in "0". The sum total of all three categories should equal the number of all imaging procedures and exams performed by your facility during its most recently completed fiscal year.)

# inpatient procedures and exams \_\_\_\_\_  
 # outpatient procedures and exams \_\_\_\_\_  
 # emergency room procedures and exams \_\_\_\_\_  
 # = TOTAL NUMBER OF RADIATION THERAPY TREATMENTS PROCEDURES AND EXAMS IN THIS SPECIALTY \_\_\_\_\_

24b. Approximately how many radiation therapy imaging procedures and exams did your facility perform in each of the following areas in your facility's most recently completed fiscal year?

**RADIATION THERAPY STIMULATION**

Please answer for the number of procedures NOT the number of patients. For example, if a total of 300 procedures were performed during the treatment of 100 patients, the answer would be 300. To calculate procedure volume, please count procedures as CPT codes. (please fill in a number for each; if none, fill in "0". The sum total of all three categories should equal the number of all imaging procedures and exams performed by your facility during its most recently completed fiscal year.)

# inpatient procedures and exams \_\_\_\_\_  
 # outpatient procedures and exams \_\_\_\_\_  
 # emergency room procedures and exams \_\_\_\_\_  
 # = TOTAL NUMBER OF RADIATION THERAPY STIMULATION PROCEDURES AND EXAMS IN THIS SPECIALTY \_\_\_\_\_

---

(Questions 13 through 24 will be shown consecutively for each specialty indicated at question 6)

Please consider your facility's operations dedicated to:

**Mammography**

13a. How many paid (not worked) full time equivalents (FTEs) does your facility currently have dedicated to mammography? Please include current staff only, NOT approved budgeted staff.

FTEs are considered to work 40 or more hours per week, or 2,080 hours per year. Please do NOT include any temporary staff (whether they be full or part time). However, do include overtime FTEs. (please fill in a number below)

# FTEs dedicated to this specialty \_\_\_\_\_

13b. Of the paid FTEs dedicated to mammography how many are in each of the following positions/job titles? Please count each individual only once. If their duties are spread across multiple positions, please answer for the position in which they spend the majority of their time. (please enter a number for each purpose below; if none, enter "0")

# Radiology Administrative FTEs (i.e., Director, Manager, Supervisor, etc.) \_\_\_\_\_  
 # Supervisory Technologist FTEs \_\_\_\_\_  
 # Technologist FTEs \_\_\_\_\_  
 # Film/Image Library FTEs \_\_\_\_\_  
 # Transcriptionist FTEs \_\_\_\_\_  
 # Receptionist/Administrative Assistant FTEs \_\_\_\_\_  
 # Scheduler FTEs \_\_\_\_\_  
 # Radiology Darkroom Tech/Aide FTEs \_\_\_\_\_  
 # Transporter FTEs \_\_\_\_\_  
 # Radiology Nurse FTEs \_\_\_\_\_  
 # PACS Administrator FTEs \_\_\_\_\_  
 # IS Department Support FTEs \_\_\_\_\_  
 # = TOTAL NUMBER OF FTEs IN THIS SPECIALTY (should equal answer to question 7a) \_\_\_\_\_

---

14. Do you consider your facility's mammography department to be fully staffed?

yes  
 no

---

15. Generally speaking, for how many hours is your facility's mammography department staffed by onsite technologists during the following days? (please enter the number of hours in each category below; if none, enter "0")

# number of hours on weekdays (Monday - Friday) \_\_\_\_\_  
 # number of hours on Saturday \_\_\_\_\_  
 # number of hours on Sunday \_\_\_\_\_

# APPENDIX

16. Do supervisory technologists in mammography at your facility perform procedures, in addition to any administrative duties?

yes  
 no ... if no, please click here to skip to question 17

15a. If yes, what percentage of their time is spent performing procedures and what percentage is spent in administrative duties? (please enter a percentage in each category below; sum total should equal 100%)

% of time spent performing procedures  
 % of time spent in administrative duties  
 = % TOTAL WORKING TIME (should equal 100%)

---

17. What percentage of the patient population at your facility in mammography have conscious sedation? (please fill in a number below; if none, enter '0')

% of patients in this specialty with conscious sedation

---

18. What percentage of the total procedures performed at your facility in mammography are performed on patients under 18 years of age? (please fill in a number below; if none, enter '0')

% of procedures in this specialty performed on patients under 18 years of age

---

19. What percentage of the total procedures performed at your facility in mammography are performed on patients under 5 years of age? (please fill in a number below; if none, enter '0')

% of procedures in this specialty performed on patients under 5 years of age

---

20. Is there a technologist training program in mammography at your facility (including affiliations)?

yes  
 no ... if no, please click here to skip to question 24

21. If yes, is the program sponsored by your facility or is it affiliated with a school?

sponsored by facility  
 affiliated with a school

---

22. How many students are currently enrolled in your technologist training program in mammography? (please enter a number below; if none, enter '0')

# students enrolled in your facility's training program for this specialty

---

23. How many FTE clinical instructors are employed in your technologist training program in mammography? (please enter a number below)

# FTE clinical instructors in your facility's training program for this specialty

---

24. Approximately how many mammography imaging procedures and exams did your facility perform in each of the following areas in your facility's most recently completed fiscal year?

Please answer for the number of procedures NOT the number of patients. For example, if a total of 300 procedures were performed during the treatment of 180 patients, the answer would be 300. To calculate procedure volume, please count procedures as CPT codes. (please fill in a number for each; if none, fill in '0'. The sum total of all three categories should equal the number of all imaging procedures and exams performed by your facility during its most recently completed fiscal year.)

# inpatient procedures and exams  
 # outpatient procedures and exams  
 # emergency room procedures and exams  
 # = TOTAL NUMBER OF IMAGING PROCEDURES AND EXAMS IN THIS SPECIALTY

(Questions 13 through 24 will be shown consecutively for each specialty indicated at question 6)

Please consider your facility's operations dedicated to:

Interventional/Angiography

13a. How many paid (not worked) full time equivalents (FTEs) does your facility currently have dedicated to interventional/angiography? Please include current staff only, NOT approved budgeted staff.

FTEs are considered to work 40 or more hours per week, or 2,080 hours per year. Please do NOT include any temporary staff (whether they be full or part time). However, do include overtime FTEs. (please fill in a number below)

# FTEs dedicated to this specialty

13b. Of the paid FTEs dedicated to interventional/angiography how many are in each of the following positions/job titles? Please count each individual only once. If their duties are spread across multiple positions, please answer for the position in which they spend the majority of their time. (please enter a number for each purpose below; if none, enter '0')

# Radiology Administrative FTEs (i.e., Director, Manager, Supervisor, etc.)  
 # Supervisory Technologist FTEs  
 # Technologist FTEs  
 # Film/Image Library FTEs  
 # Transcriptionist FTEs  
 # Receptionist/Administrative Assistant FTEs  
 # Scheduler FTEs  
 # Radiology Darkroom Tech/Aide FTEs  
 # Transporter FTEs  
 # Radiology Nurse FTEs  
 # PACS Administrator FTEs  
 # IS Department Support FTEs  
 # = TOTAL NUMBER OF FTEs IN THIS SPECIALTY (should equal answer to question 7a)

---

14. Do you consider your facility's interventional/angiography department to be fully staffed?

yes  
 no

---

15. Generally speaking, for how many hours is your facility's interventional/angiography department staffed by onsite technologists during the following days? (please enter the number of hours in each category below; if none, enter '0')

# number of hours on weekdays (Monday - Friday)  
 # number of hours on Saturday  
 # number of hours on Sunday

---

16. Do supervisory technologists in interventional/angiography at your facility perform procedures, in addition to any administrative duties?

yes  
 no ... if no, please click here to skip to question 17

16a. If yes, what percentage of their time is spent performing procedures and what percentage is spent in administrative duties? (please enter a percentage in each category below; sum total should equal 100%)

% of time spent performing procedures  
 % of time spent in administrative duties  
 = % TOTAL WORKING TIME (should equal 100%)

# APPENDIX

17. What percentage of the patient population at your facility in *interventional/angiography* have conscious sedation? (please fill in a number below, if none, enter "0")

% of patients in this specialty with conscious sedation

---

18. What percentage of the total procedures performed at your facility in *interventional/angiography* are performed on patients under 18 years of age? (please fill in a number below, if none, enter "0")

% of procedures in this specialty performed on patients under 18 years of age

---

19. What percentage of the total procedures performed at your facility in *interventional/angiography* are performed on patients under 5 years of age? (please fill in a number below, if none, enter "0")

% of procedures in this specialty performed on patients under 5 years of age

---

20. Is there a technologist training program in *interventional/angiography* at your facility (including affiliations)?

yes

no ... if no, please click here to skip to question 24

---

21. If yes, is the program sponsored by your facility or is it affiliated with a school?

sponsored by facility

affiliated with a school

---

22. How many students are currently enrolled in your technologist training program in *interventional/angiography*? (please enter a number below, if none, enter "0")

# students enrolled in your facility's training program for this specialty

---

23. How many FTE clinical instructors are employed in your technologist training program in *interventional/angiography*? (please enter a number below)

# FTE clinical instructors in your facility's training program for this specialty

---

24. Approximately how many *interventional/angiography* imaging procedures and exams did your facility perform in each of the following areas in your facility's most recently completed fiscal year?

Please answer for the number of procedures NOT the number of patients. For example, if a total of 300 procedures were performed during the treatment of 100 patients, the answer would be 300. To calculate procedure volume, please count procedures as CPT codes. (please fill in a number for each; if none, fill in "0". The sum total of all three categories should equal the number of all imaging procedures and exams performed by your facility during its most recently completed fiscal year.)

# inpatient procedures and exams

# outpatient procedures and exams

# emergency room procedures and exams

# = TOTAL NUMBER OF IMAGING PROCEDURES AND EXAMS IN THIS SPECIALTY

---

(Questions 13 through 24 will be shown consecutively for each specialty indicated at question 6)

Please consider your facility's operations dedicated to:

Cardiac Cath Radiology

13a. How many paid (not worked) full time equivalents (FTEs) does your facility currently have dedicated to *cardiac cath radiology*? Please include current staff only, NOT approved budgeted staff.

FTEs are considered to work 40 or more hours per week, or 2,080 hours per year. Please do NOT include any temporary staff (whether they be full or part-time). However, do include overtime FTEs. (please fill in a number below)

# FTEs dedicated to this specialty

13b. Of the paid FTEs dedicated to *cardiac cath radiology* how many are in each of the following positions/job titles? Please count each individual only once. If their duties are spread across multiple positions, please answer for the position in which they spend the majority of their time. (please enter a number for each purpose below; if none, enter "0")

# Radiology Administrative FTEs (i.e., Director, Manager, Supervisor, etc.)

# Supervisory Technologist FTEs

# Technologist FTEs

# Film/Image Library FTEs

# Transcriptionist FTEs

# Receptionist/Administrative Assistant FTEs

# Scheduler FTEs

# Radiology Darkroom Tech/Aide FTEs

# Transporter FTEs

# Radiology Nurse FTEs

# PACS Administrator FTEs

# IS Department Support FTEs

# = TOTAL NUMBER OF FTEs IN THIS SPECIALTY (should equal answer to question 7a)

---

14. Do you consider your facility's *cardiac cath radiology* department to be fully staffed?

yes

no

---

15. Generally speaking, for how many hours is your facility's *cardiac cath radiology* department staffed by onsite technologists during the following days? (please enter the number of hours in each category below; if none, enter "0")

# number of hours on weekdays (Monday - Friday)

# number of hours on Saturday

# number of hours on Sunday

---

16. Do supervisory technologists in *cardiac cath radiology* at your facility perform procedures, in addition to any administrative duties?

yes

no ... if no, please click here to skip to question 17

---

16a. If yes, what percentage of their time is spent performing procedures and what percentage is spent in administrative duties? (please enter a percentage in each category below; sum total should equal 100%)

% of time spent performing procedures

% of time spent in administrative duties

# = % TOTAL WORKING TIME (should equal 100%)

---

17. What percentage of the patient population at your facility in *cardiac cath radiology* have conscious sedation? (please fill in a number below, if none, enter "0")

% of patients in this specialty with conscious sedation

---

18. What percentage of the total procedures performed at your facility in *cardiac cath radiology* are performed on patients under 18 years of age? (please fill in a number below, if none, enter "0")

% of procedures in this specialty performed on patients under 18 years of age

---

19. What percentage of the total procedures performed at your facility in *cardiac cath radiology* are performed on patients under 5 years of age? (please fill in a number below, if none, enter "0")

% of procedures in this specialty performed on patients under 5 years of age



# APPENDIX

20. Is there a technologist training program in cardiac cath radiology at your facility (including affiliations)?

yes  
 no ... if no, please click here to skip to question 24

---

21. If yes, is the program sponsored by your facility or is it affiliated with a school?

sponsored by facility  
 affiliated with a school

---

22. How many students are currently enrolled in your technologist training program in cardiac cath radiology? (please enter a number below, if none, enter "0")

# students enrolled in your facility's training program for this specialty

---

23. How many FTE clinical instructors are employed in your technologist training program in cardiac cath radiology? (please enter a number below)

# FTE clinical instructors in your facility's training program for this specialty

---

24. Approximately how many cardiac cath radiology imaging procedures and exams did your facility perform in each of the following areas in your facility's most recently completed fiscal year?

Please answer for the number of procedures NOT the number of patients. For example, if a total of 300 procedures were performed during the treatment of 100 patients, the answer would be 300. To calculate procedure volume, please count procedures as CPT codes. (please fill in a number for each; if none, fill in "0". The sum total of all three categories should equal the number of all imaging procedures and exams performed by your facility during its most recently completed fiscal year.)

# inpatient procedures and exams  
 # outpatient procedures and exams  
 # emergency room procedures and exams  
 # = TOTAL NUMBER OF IMAGING PROCEDURES AND EXAMS IN THIS SPECIALTY

---

**More about your facility and staffing**

---

25. How many total FTEs handle the IS needs of DI, including PACS, RIS, voice recognition (VR)? (please enter a number below)

# FTEs handling the IS needs of DI

---

26. Which of the following positions perform PET/CT procedures at your facility? (please select all that apply)

nuclear med techs  
 RTs  
 not applicable (do not provide PET/CT procedures)

---

27. Does your facility allow technologists to perform fluoroscopy (terminal ilium) without a radiologist's supervision?

yes  
 no

---

28. Which of the following activities do technologists perform at your facility as a routine part of their responsibilities? (please select all that apply)

start IVs  
 IV contrast administrator  
 stress testing (nuclear medicine)  
 EKG  
 other  
 none

29. Do technologists at your facility cross-train between imaging modalities?

yes  
 no

---

30. In which of the following areas does your facility require that technologists be certified (even if there are no state requirements)? (please select all that apply)

|  |   |
|--|---|
| <input type="checkbox"/> general radiography                   | <input type="checkbox"/> radiation therapy          |
| <input type="checkbox"/> CT                                    | <input type="checkbox"/> mammography                |
| <input type="checkbox"/> PET                                   | <input type="checkbox"/> interventional angiography |
| <input type="checkbox"/> ultrasound and/or vascular ultrasound | <input type="checkbox"/> cardiac cath radiology     |
| <input type="checkbox"/> nuclear medicine                      | <input type="checkbox"/> none of these              |
| <input type="checkbox"/> MRI                                   |   |

---

31. Which of the following responsibilities do limited license personnel perform at your facility? (please select all that apply)

|  |  |
|--|--|
| <input type="checkbox"/> fluoroscopy                 | <input type="checkbox"/> MRI                     |
| <input type="checkbox"/> radiography                 | <input type="checkbox"/> other (please specify): |
| <input type="checkbox"/> bone densitometry/DEXA scan | <input type="checkbox"/> none                    |

---

32. In your facility's most recently completed fiscal year, what was the average vacancy rate for FTEs? (please fill in a number below, if none, enter "0")

% average vacancy rate

---

33. In its most recently completed fiscal year, with which types of staff did your facility fill vacancies? (please select all that apply)

regular overtime staff  
 locum tenens techs (temporary staff hired for 13 weeks or longer)  
 PRN (registry) techs  
 none of these

---

34. What was your facility's total cost in its most recently completed fiscal year for each of the following types of agency staff positions? (please fill in a number for each category below, if none, enter "0")

\$ cost for locum tenens techs  
 \$ cost for PRN (registry) techs

---

35. For your facility's most recently completed fiscal year, what was the percentage of each of the following positions included in your total number of budgeted techs? (please fill in a number below, if none, enter "0")

% non-agency staff  
 % locum tenens  
 % PRN (registry)  
 # = TOTAL BUDGETED TECHS (should equal 100%)

---

36. Was the number of locum tenens staff at your facility an increase, decrease, or about the same amount as the year previous?

increase  
 about the same  
 decrease

---

37. Was the number of PRN (registry) staff at your facility an increase, decrease, or about the same amount as the year previous?

increase  
 about the same  
 decrease

**About mobile services and transportation**

38. In which of the following areas does your facility use a mobile service, and for each used, does your facility supply its own techs or does it use contracted techs from the mobile service? (please select one option for each area)

|                                   | do not use            | use mobile service and facility provides techs | use mobile service and contract techs |
|-----------------------------------|-----------------------|--|---------------------------------------|
| mobile PET/CT                     | <input type="radio"/> | <input type="radio"/>                          | <input type="radio"/>                 |
| mobile CT                         | <input type="radio"/> | <input type="radio"/>                          | <input type="radio"/>                 |
| mobile MRI                        | <input type="radio"/> | <input type="radio"/>                          | <input type="radio"/>                 |
| mobile mammography                | <input type="radio"/> | <input type="radio"/>                          | <input type="radio"/>                 |
| mobile stereotactic breast biopsy | <input type="radio"/> | <input type="radio"/>                          | <input type="radio"/>                 |
| other: _____<br>(please specify)  | <input type="radio"/> | <input type="radio"/>                          | <input type="radio"/>                 |

39. In which of the following areas does your facility provide transportation? (please select all that apply)

- general radiography
- CT
- PET
- ultrasound and/or vascular ultrasound
- nuclear medicine
- MRI
- radiation therapy
- mammography
- interventional/angiography
- cardiac cath radiology
- none of these ... if none, please click here to skip to question 42

40. What percentage of the patients transported at your facility is provided by each of the following entities? (please fill in a number below; if none, enter "0")

% central transport (not DI employees) \_\_\_\_\_

% technologists transport \_\_\_\_\_

% DI transporters \_\_\_\_\_

**\_\_\_\_\_ = TOTAL PATIENTS TRANSPORTED (should equal 100%)**

41. What best describes the type of transporting used in each of the following areas of your facility? (please select all that apply in each area)

**a. inpatient**

- central transport (not DI employees)
- technologists transport
- DI transporters

**b. emergency department**

- central transport (not DI employees)
- technologists transport
- DI transporters
- emergency department personnel

**About RIS/PACS/Electronic Imaging**

42. Does your facility have a computerized radiology information system (RIS)?

yes

no ... if no, please click here to skip to question 45

43. If yes, is it interfaced to the hospital system?

yes

no

don't know

44. What functions are being used on your facility's RIS? (please select all that apply)

- registration
- scheduling
- film-tracking
- transportation scheduling
- mammography quality assurance
- billing
- other (please specify)

45. Does your facility use a picture archiving and communication system (PACS)?

yes

no ... if no, please click here to skip to question 54

46. If yes, for how long has your facility had PACS?

less than 1 year

1 to 3 years

4 to 5 years

7 to 9 years

10 years or more

47. Did your facility use a consultant as part of its PACS implementation process?

yes

no ... if no, please click here to skip to question 49

48. If yes, how useful did you find the PACS consultant? (please select one rating)

|                       |                       |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| very useful           | 4                     | 3                     | 2                     | not at all useful     |
| 5                     |                       |                       |                       | 1                     |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

49. What percentage of your PACS administrator's time is spent in each of the following areas? (please enter a percentage in each category below; if none, enter "0"; total should sum to 100%)

% administrative duties \_\_\_\_\_

% PACS applications \_\_\_\_\_

% technologist duties \_\_\_\_\_

% other duties (unrelated to PACS) \_\_\_\_\_

**\_\_\_\_\_ = TOTAL (should equal 100%)**

# APPENDIX

50. Is your PACS administrator responsible for RIS as well?  
 yes  
 no

---

51. How many assistants/application technicians support your facility's PACS administrator?  
*(please enter a number below; if none, enter "0")*  
 # assistants/applications technicians supporting PACS administrator

---

52. In what departments do these assistants/application technicians work? *(please select all that apply)*  
 radiology/imaging  
 IT&S  
 other *(please specify)*:  
 not applicable

---

53. Has your facility reassigned clerical staff due to PACS implementation?  
 yes  
 no

---

54. Which of the following activities do technologists in your facility perform as part of their routine responsibilities? *(please select all that apply)*  
 signing out films  
 printing films  
 pulling old film  
 digitizing previous exams  
 other clerical duties  
 none of these

---

55. What percentage of referring physicians require hard copy images?  
*(please fill in a number below; if none, enter "0")*  
 % of referring physicians requiring hard copy images

---

56. Which of the following does your facility do? *(please select all that apply)*  
 print film  
 burn CDs  
 provide your own data storage  
 use an offsite storage vendor  
 none of these

---

57. What percentage of your facility's plain film images are done on each of the following formats? *(please enter a percentage in each category below; if none, enter "0"; total should sum to 100%)*  
 % computed radiography (CR)  
 % digital direct radiography (DR)  
 % film screen  
 = TOTAL (should equal 100%)

58. In which of the following modalities does your facility utilize worklists?  
 A modality worklist is defined as a worklist that is generated on a modality (for example, CT control panel) that includes schedule and patient demographic information that will automatically populate the demographic fields on the modality so that a user does not have to retype the information. This information is sent by the RIS directly or via a PACS broker. The modality as well as the RIS and PACS broker must support this function. *(please select all that apply)*

|   |  |
|---|--|
| <input type="checkbox"/> CT               | <input type="checkbox"/> cardiac catheterization     |
| <input type="checkbox"/> PET              | <input type="checkbox"/> CR                          |
| <input type="checkbox"/> MRI              | <input type="checkbox"/> DR                          |
| <input type="checkbox"/> ultrasound       | <input type="checkbox"/> film digitizer              |
| <input type="checkbox"/> nuclear medicine | <input type="checkbox"/> film screen with plane film |
| <input type="checkbox"/> fluoroscopy      | <input type="checkbox"/> mammography                 |
| <input type="checkbox"/> angiography      | <input type="checkbox"/> none of these               |

---

59. How many computer radiography (CR) units does your facility have?  
*(please enter a number below; if none, enter "0")*  
 # CR units

---

60. How many digital radiography (DR) units does your facility have?  
*(please enter a number below; if none, enter "0")*  
 # DR units

---

61. Does your facility have voice recognition (VR) technology?  
 yes  
 no

---

Thank you!

As a result of input from imaging leaders like you, AHRA can provide information that will help all in the profession better succeed. Your time and dedication are appreciated.

If you wish to receive a free copy of the report based on the data aggregated for this study, please fill in your email address below. Your email address and survey answers will not be used for any other purpose or disclosed to others.

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