Examination Process

- Download Limited Scope X-ray Operator/Bone Density Equipment Operator Exam Application on our website at [www.health.state.mn.us/xray](http://www.health.state.mn.us/xray).
- Include a $125.00 money order or cashiers check payable to ARRT with form.
- Include a $25.00 money order or cashiers check payable to the Minnesota Department of Health (MDH) with form. We recommend sending this as Certified Mail. **Both fees must be mailed to MDH, must be separate certified check or money orders, and are nonrefundable.** Combining payments will result in a delay in processing. Please allow 30 days for processing.
- MDH will review the application, forward approved applications and fee to ARRT.
- ARRT will send approved applicants appropriate exam materials. Applicants will have 90 days in which to take the exam. **It is strongly recommended to schedule an exam right away, as exam sites fill up quickly.**
- MDH will notify approved applicants of their exam scores and passing exams. Passing rate is 70% for the core AND each module.
- Limited Scope X-ray Operator applicants must pass the Core Exam and the respective region of anatomy module exam(s) for which they wish to x-ray before performing x-rays.
- Bone Density Equipment Operator applicants must pass the Bone Density Equipment Operator exam before performing bone densitometry exams limited to bone densitometry equipment.
- If an applicant fails a section, they will need to retest to take x-rays of that anatomical region.
- The fees and application process is the same for the initial application and the retake application. Once a section is passed, it does not have to be retaken.

Exemptions

Those individuals who have met the following qualifications are exempt from taking the Limited Scope X-ray exam: Individuals licensed in Minnesota to practice medicine, osteopathy, chiropractic, podiatry and dentistry; Physicians assistants with a valid Physician-Physician Assistant delegation agreement who are licensed in Minnesota; Individuals who have passed the ARRT radiography examination; Individuals who have passed the ACRRT radiography examination; Individuals who have passed the ACRR Limited Examination for Minnesota; Individuals who have passed ARRT Limited Scope of Practice in Radiography equivalent examinations from other states, for those modules and modalities passed; Individuals who had passed the limited x-ray machine operators examination required before January 1, 2008; Dental Assistants licensed in Minnesota; Dental Hygienists licensed in Minnesota; Dental Therapists licensed in Minnesota; Certified Registered Nurse Anesthetists licensed in Minnesota; Nuclear Medicine Technologists certified with the NMTCB performing PET/SPECT CT; Nuclear Medicine Technologists registered with ARRT performing PET/SPECT CT; and non-human-use x-ray operators, excluding Industrial Radiographers who must be certified through a radiographer certification program.
Limited Scope X-ray Operator & Bone Density Equipment Operator Exams Application

*Effective January 1, 2015, exam fees have increased. Please note change below.*

A. Applicant Information
Name (as it appears on your social security card)

<table>
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<tr>
<th>First</th>
<th>Middle Initial</th>
<th>Last</th>
</tr>
</thead>
</table>

Home Address: ___________________ City/State/Zip: ___________________
Date of Birth: ___/___/XXXX Social Security Number: ___-___-_____
Phone #: ___________________ Email: ___________________
Training/Classes completed in preparation for this exam: ___________________
School attended in preparation for this exam: ___________________

B. Testing (If a current application for the Radiologic Technologist (RT) Exam, Limited Scope, or Bone Density Exams is pending, applicants cannot take any of the other exams until pending exam is passed and/or application is closed.)

- **Limited Scope Core Exam**
  - At least one module MUST be taken. Applicant can only take x-rays on exams passed.
  - Check which modules you are taking along with the Limited Scope Core Exam:
    - [ ] Chest
    - [ ] Extremity
    - [ ] Podiatry
    - [ ] Skull/Sinus
    - [ ] Spine

- **Bone Density Core Exam**

- **Retake Exam** (Please check which exams/modules you are retaking or adding)
  - [ ] Limited Scope Core
  - [ ] Chest
  - [ ] Extremity
  - [ ] Podiatry
  - [ ] Skull/Sinus
  - [ ] Spine
  - [ ] Bone Density Core

C. Fees Due*

- $125.00 Certified Check or Money Order (ARRT Fee - MDH will forward to ARRT)
- $  25.00 Certified Check or Money Order (MDH Processing Fee)

Both fees must be mailed to MDH. must be separate certified check or money orders, and are NONREFUNDABLE.
We recommend sending money through the mail as Certified Mail. Combining fees into one payment will delay processing and application and fees will be returned. We will not accept personal checks for fees. Your $125.00 fee will be forwarded to ARRT.

D. Signature
I declare that all the information I have provided is true and complete, and that I have read and understand the attached “Tennessee Warning”. We are requesting your name, address and phone number so that we may contact you for further information relating to your Limited X-ray Operator registration. You are not required to provide this information. However, without it we will not be able to contact you regarding additional information that may be needed.

All information you provide is legally classified as confidential data for individuals and can only be released to Minnesota Department of Health employees as need to process renewal registration, and anyone having a court order to obtain the information.

Applicant Signature ___________________ Date ____________

Before mailing:
- Fill out all sections of the application, sign and date
- Submit $125.00 **certified check or money order** payable to ARRT
- Submit $25.00 **certified check or money order** payable to MDH
- Submit application and all fees as Certified Mail to MDH

MAIL ALL TO: Minnesota Department of Health
Radiation Control, X-ray Unit
625 Robert Street North
PO Box 64497
St. Paul, MN  55164-0497

Revised 3/1/15
Tennessen Warning: Radiation Control, X-ray Unit

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- Department of Health employees as needed to process renewal registration
- Anyone having a court order to obtain the information

Notice given with x-ray operator application.