

Limited Scope Examination Process and Application

LIMITED SCOPE X-RAY OPERATORS

Examination Process

- 1. Complete the Limited Scope X-ray Operator (LSXO) Exam registration application.
- 2. Include a \$25.00 money order or cashier's check payable to Minnesota Department of Health (MDH) and mail with the registration application. Your application will not be processed with a personal or business check. Fees are nonrefundable and nontransferable.
- 3. MDH recommends typing or writing legibly on this application and sending it Certified Mail.
- MDH will review the registration application and send a letter by email to the applicant regarding next steps and payment to the American Registry of Radiologic Technologist (ARRT).
- 5. After receiving notification from MDH, the applicant will pay the ARRT fee of \$150.00 by credit card on their website at <u>ARRT (https://state.arrt.org/)</u>. ARRT does not accept money orders, cashier checks, personal checks, or business checks.
- 6. ARRT will send applicants the exam handbook that explains the exam process. Applicants will have 90 days in which to take the exam. MDH strongly recommends scheduling an exam right away, as exam sites fill up quickly.

Important Reminders

- LSXO applicants must pass the core module exam and the respective procedure module(s)
 exam(s) before performing x-rays. You must pass the core module exam before taking x-rays
 on any passed procedure modules.
- If an applicant fails any procedure modules, they will need to retake and pass 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 module is passed, it does not have to be retaken.
- If an extension to the 90-day exam window is needed, requests should be received one week prior to the window expiration date. LSXO exam extension requests will be sent to MDH by email to health.xray@state.mn.us. Extending an exam window is limited to three extensions.
- For ARRT online payments, a separate username and password needs to be created for each applicant. A business or school making an online payment for multiple applicants cannot use the same username and password for all their applicants.
- If a current application for the ARRT Radiologic Technologist (RT) exam, LSXO, or Bone Density Equipment Operator (BDEO) exam is pending, applicants cannot apply for another exam until the pending exam is passed and/or application is closed.
- To close a LSXO application, the applicant needs to send a written request to the ARRT. At that time, the applicant agrees to forfeit their fees to the MDH and ARRT. When approved by ARRT, the applicant can resubmit a new LSXO application and the old LSXO application will be closed.
- LSXO must not operate fluoroscopy, computed tomography (CT), cone beam computed tomography (CBCT), bone densitometry, mammography x-ray systems, or perform x-ray procedures where contrast media is used.



Limited Scope X-ray Operator Exam Application

RADIATION CONTROL, X-RAY UNIT

Skull/Sinus

Spine

Payment must be a cashier's check or money order.

Your application will be returned if included with a personal or business check.

Applicant (All fields in Applicant are mandatory)
First Name:
Middle Initial:
Last Name:
Date of Birth (XX/XX/XXXX):
Social Security Number (XXX-XXXXX):
Home Address:
City/State/Zip:
Phone Number:
Email:
Exam Training
School attended:
Training/Classes completed:
Core Module and Procedure Modules
Limited Scope Core Module (At least one procedure module must be checked below)
Chest
Extremity
Podiatry
Skull/Sinus
Spine
Retake Core Module and/or Procedure Modules
Limited Scope Core Module (Check retake procedure modules below, if applicable)
Chest
Extremity
Podiatry

Fees Due with Application

\$25.00 MDH Processing Fee. Cashier's check/money order attached. Your application will not be processed with a personal or business check. Mail to address below.

Signature

I declare that all the information I have provided is true and complete, and that I have read and understand the "Tennessen Warning" below.

Applicant Signature	Date

Tennessen Warning

The Commissioner of Health uses the information provided on an application to determine if you meet the requirements for licensure, certification, registration or other form of approval authorized by statute or rule. You are not required to provide any of the requested information. However, if the requested information is not provided, your application will be denied. Submitting false information will result in the denial of your application or suspending, revoking, or taking other disciplinary action against your license, certificate, registration, or other form of approval authorized by statute or rule after it is issued.

Minnesota Statute, section 270C.72, subdivision 4, requires you to submit your social security number to the commissioner before a license, certificate, registration, or other form of approval authorized by statute or rule can be issued to you. The information submitted will not be disclosed outside the Minnesota Department of Health during the application process. It may be disclosed to others, including the Attorney General's Office and persons contacted for purposes of verification or investigation, if required by law. Information on the application, including your social security number, will be provided to the Minnesota Department of Revenue at its request. If the matter of your license, registration or other form of approval authorized by statute or rule is contested, the information submitted on the application may become public. When you become licensed, certified, registered or other form of approval authorized by statute or rule, all information in the application becomes public, except your social security number, which remains private.

12/17/2021
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625 Robert St N
PO Box 64497
St. Paul, MN 55164-0497
651-201-4545
health.xray@state.mn.us
www.health.state.mn.us/xray

To obtain this information in a different format, call: 651-201-4545. Printed on recycled paper.