

Notification for Out-of-State Registrants

X-RAY UNIT APPROVED FORM

A person that brings an x-ray system into Minnesota must register with the Minnesota Department of Health (MDH) and pay fees according to Minnesota Statutes, 144.121 prior to operating x-ray systems in the state. The out-of-state registrant must comply with all applicable laws and rules in Minnesota. Please register according to <https://www.health.state.mn.us/communities/environment/radiation/xray/forms.html> and follow the instructions at the end of this notification. If you are not registered with the MDH, services are prohibited in Minnesota.

An out-of-state registrant must notify MDH at least three working days prior to services performed in Minnesota. To expedite the process, all items in this notification for Out-of-State Registrants must be completed and emailed to health.xray@state.mn.us. Incomplete requests will not be reviewed and returned.

Out-of-State Registrant Information

Registrant Name

Registration Number

Mailing Address

City

State

Zip

Contact Name

Contact Phone

Contact Email

Company Personnel Operating X-ray System (include additional documentation with qualifications):

List states where the x-ray system is registered:

Describe the nature and scope of use:

Physical Location of Use

Name

Address

Onsite Contact Name

Onsite Contact Phone

Onsite Contact Email

Location of Use Start Date:

Location of Use End Date:

X-ray System Type

- C-arm
- C-arm Mini
- Computed Tomography (CT)
- Hand-held Intraoral
- Industrial
- O-arm
- Radiographic
- X-ray Fluorescent Analyzer (XRF)
- Other

Console Manufacturer

Console Model

Console Serial Number

I certify that the information provided is accurate and complete.

Printed Name

Signature

Date

Instructions for completing a Notification for Out-of-State Registrants

The following guidelines are for companies from other states wishing to perform x-ray services within the state of Minnesota. Reciprocity rules can be found on the MDH website at <https://www.revisor.mn.gov/rules/4732.0250/>.

Reciprocity is not intended for x-ray systems that are provided to Minnesota registrants for temporary use such as demonstration.

Out-of-State Registrant Information

Provide the following information for each respective item.

- The name and address of the company wishing to operate x-ray systems under reciprocity in the State of Minnesota.
- Minnesota registration number.
- The name, phone number and email address for an individual responsible regarding the reciprocity application.
- The names and qualifications of the personnel operating the x-ray system. Submit the names and documentation of qualifications for personnel on a separate sheet.
- List other states where the x-ray system is registered.
- A brief description of the services that you are to provide.

Physical Location of Use

- The name and address of the site where the x-ray system will be operate in the State of Minnesota. Each physical location of use requires a separate submission.
- The name, phone number and email address for an onsite contact person that will be physically located at the site in Minnesota.
- Indicate the start and end date of the x-ray system use in Minnesota.

X-ray System Type

Provide the following information for each respective item.

- The manufacturer of the x-ray system.
- The model of the x-ray system.
- The console serial number of the x-ray system.
- Provide the date the x-ray system was last calibrated or evaluated to verify compliance with manufacturer's specifications and Minnesota Rules, Chapter 4732.
- Check the appropriate box for the type of x-ray system. Provide a brief explanation if "Other" is checked.

Signature

Provide the printed name and signature of an authorized company representative.