

**Testimony in Support of SB 236 before the
Senate Health, Human Services and Medicaid Committee
Chairman Dave Burke**

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Chairman Burke, Vice-Chair Huffman, ranking member Antonio and members of the Senate Health, Human Services and Medicaid Committee, thank you for the opportunity to provide proponent testimony in support of Senate Bill 236.

My name is Sriram Mannava and I am a practicing radiologist with Columbus Radiology Corporation, a practice with over 100 physicians serving more than 15 hospitals and health care systems in Ohio. For the past 6 years, I have served as the Director of Quality Improvement and Patient Safety for the practice. I also currently serve as the director of radiology at Fairfield Medical Center. I am here on behalf of the Ohio Radiological Society and we would like to express our appreciation to Senator Huffman for introducing this important legislation and to the Chair, and this committee, for the opportunity to provide proponent testimony.

Imaging-related medications known as contrast agents are commonly utilized to improve visualization of radiographic, computed tomography (CT), and magnetic resonance (MR) images. While traditional medications are used specifically for their pharmacological actions, the ideal imaging agent provides enhanced contrast with minimal biological interaction. Until recently, pharmacists had little interaction with radiology or special imaging departments at all. Imaging-related products routinely fell under the auspices of a radiologist and were historically not even considered to be “medications.”

Senate Bill 236 seeks to address an inefficiency within the scope of practice of nuclear medicine technologists and radiographers. Currently, the documenting of contrast and radiopharmaceuticals administered by radiographers and nuclear medicine technologists can be entered into an electronic medical record only after a second prescription is ordered just for that documentation.

The prescription requirement for documentation into an electronic medical record is unnecessary. This legislation would explain that the documenting of these orders can be processed using an institution's clinical guidelines, which are established by the clinical leadership of the institution. These changes would in no way increase any provider's scope of practice, but instead clarify the process that has historically been followed.

Thank you for the opportunity to provide proponent testimony in support of Senate Bill 236. The Ohio Radiological Society urges your favorable vote on the legislation. I would be happy to answer any questions at this time.