**From:** MACEO FRANKLIN

**To:** [DPH-Testimony, Reg (DPH)](mailto:RTestimony@MassMail.State.MA.US)

**Subject:** Limited Radiographer License

**Date:** Tuesday, March 25, 2025 12:34:32 PM

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**March 25, 2025 Maceo Franklin**

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**To: Massachusetts Department of Public Health**

**Subject:** Opposition to the Limited Scope Radiography Licensure (105 CMR 125.00) – March 26, 2025

Dear Members of the Massachusetts Department of Public Health,

My name is Maceo Franklin, and I am a graduating Radiologic Technology student from North Shore Community College. I am submitting this written testimony in opposition to the implementation of proposed amendments to 105 CMR 125.000 Licensing of Radiologic Technologists scheduled for March 26, 2025.

1. **Impact on Patient Care**: X-ray imaging is a crucial diagnostic tool, and restricting the ability to perform these exams could lead to delays in diagnosis and treatment. A limited license might also increase the burden on healthcare providers, especially in rural or underserved areas where access to specialists is already limited. This could ultimately result in patients not receiving timely care, which could worsen their health outcomes.
2. **Unnecessary Bureaucracy**: Limiting X-ray licenses could create an excessive administrative burden. Additional layers of licensing and certification requirements might result in increased operational costs and complexities for healthcare providers. This could divert attention and resources away from patient care and could disproportionately affect smaller clinics and hospitals that may not have the capacity to handle such additional regulatory requirements.
3. **Workforce Disruptions**: Many medical professionals who currently perform X-ray imaging are highly trained and skilled in this area. Introducing a limited license could create confusion and unnecessary disruptions in their ability to perform their jobs, potentially leading to a shortage of qualified personnel. This could further exacerbate staffing challenges, particularly in specialized fields.
4. **Training and Compliance**: With the proper training and oversight already in place for radiologic technologists and medical professionals, a limited X-ray license may be an unnecessary step backward. The focus should be on improving existing standards,

ensuring the continued competency of practitioners, and expanding training opportunities, rather than imposing a more restrictive framework that could reduce the number of qualified individuals performing critical diagnostic procedures.

In conclusion, while safety and regulation are vital in healthcare, the proposed limited X-ray license seems to create more challenges than it solves. I urge you to reconsider this approach and explore alternative solutions that better balance regulatory oversight with the need for accessible, high-quality patient care.

Massachusetts is known for its high standards in patient care. Lowering qualifications for individuals performing X-ray exams risks compromising the safety and effectiveness of diagnostic imaging. I stand in full support of the Massachusetts Society of Radiologic Technologists (MSRT) and their recommendations to uphold strong professional standards for radiologic imaging.

I urge the Department of Public Health to carefully consider these concerns and ensure that any changes to radiologic licensing regulations prioritize patient well-being and maintain the integrity of our profession.

Sincerely, Maceo Franklin