

**NOVA SCOTIA REGULATOR OF
MEDICAL IMAGING AND RADIATION
THERAPY**

BY-LAWS

**PROPERTY OF:
NOVA SCOTIA REGULATOR OF MEDICAL IMAGING AND RADIATION THERAPY**

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NOTE

Where there is conflict between a provision of these By-laws and a provision of the *Regulated Health Professions Act*, the Regulated Health Professions General Regulations, or the Medical Imaging and Radiation Therapy Regulations, the provisions of the Act and/or Regulations prevail.

Acknowledgement

The Nova Scotia Regulator of Medical Imaging and Radiation Therapy acknowledges that we live and work in Mi'kma'ki, the ancestral and unceded homeland of the Mi'kmaq People. We recognize the enduring relationship that the Mi'kmaq have with this land and honour the Peace and Friendship Treaties that continue to guide our shared responsibilities.

We are committed to understanding and addressing the lasting impacts of colonization, including the systemic inequities and barriers that Indigenous Peoples, including Mi'kmaq and Métis communities, continue to experience within healthcare systems. Equity, diversity, inclusion, reconciliation, and accessibility are essential to our mandate and to the delivery of safe, respectful, and culturally responsive healthcare.

As treaty people, we recognize our collective responsibility to support reconciliation through meaningful action. We are dedicated to listening, learning, and working in partnership with Indigenous communities to advance respect for Indigenous rights, promote equitable access to healthcare, and strengthen fairness and inclusion within our regulatory practices.

We also acknowledge the rich history, resilience, and significant contributions of African Nova Scotians, whose presence has shaped the social, cultural, and economic fabric of Nova Scotia for more than four centuries. We are committed to fostering a regulatory environment that values diversity, addresses inequities, and supports belonging for all.

Part 1 – Interpretation and Corporate Matters

1. Definitions

- 1.1 All words used in these by-laws that are not otherwise defined in the By-laws have the same meaning as set out in the Act or regulations.
- 1.2 In these By-laws, unless the context requires:
- (a) "Act" means the *Regulated Health Professions Act*, SNS 2023, c 15;
 - (b) "Board" when used in these By-laws includes the Initial Board and Subsequent Boards of the Nova Scotia Regulator of Medical Imaging and Radiation Therapy, unless the Initial Board or Subsequent Board is specifically identified;
 - (c) "Board Competency Matrix" means the list of competencies, qualities and other criteria approved by the Board to describe the collective desired composition of the Board;
 - (d) "Board Members Code of Conduct" means the Code approved by the Board governing the conduct of Board members;
 - (e) "Chair" means the Chair of the Initial Board or the Chair of a Subsequent Board or Chair of the Committee, as the context requires;
 - (f) "Communications Liaison" means the Communications Liaison of the Initial Board or the Communications Liaison of a Subsequent Board, as the context requires
 - (g) "cross-practice" means an activity, procedure or service within the scope of practice of one licensing category that a registrant licensed in a separate licensing category may engage in that:
 - i. is identified by the Board as necessitating additional education, training, or other requirements; and
 - ii. requires approval of the Registrar before a registrant may engage in the activity, procedure or service as part of their individual scope of practice.
 - (h) "cross-practice authorization process" means the process approved by the Board to authorize a registrant licensed in 1 licensing category to engage in an activity, procedure, or service within the scope of a separate licensing category;
 - (i) "good standing" for purposes of appointment as a registrant Board member, a registrant officer, or a registrant committee member, means the status of a registrant who:
 - i. holds a practising licence or a conditional licence, unless there is a condition on the licence restricting the registrant from eligibility to serve on the Board or a committee;
 - ii. is current in their continuing competence requirements;
 - iii. does not owe any outstanding fees or costs to the Regulator; and

- iv. is not subject to any licensing sanction, legal proceeding, or ongoing regulatory process that in the opinion of the Board, impacts their ability to ethically and competently serve as a member of the Board or an officer or as a member of a committee, or would otherwise be contrary to the objects of the Regulator;
- (j) “Initial Board” means the Board of the Regulator continued from the Legacy Board following the date of repeal of the *Medical Imaging and Radiation Therapy Professionals Act*, SNS 2013, c 7;
- (k) “Legacy Board” means the Board of the Nova Scotia College of Medical Imaging and Radiation Therapy Professionals in existence immediately prior to the repeal of the *Medical Imaging and Radiation Therapy Professionals Act*;
- (l) “Medical Imaging and Radiation Therapy Regulations” means the Medical Imaging and Radiation Therapy Regulations approved by Order in Council under the authority of the *Regulated Health Professions Act*;
- (m) “Meeting Rules” means such rules approved by the Board that govern the conduct of Board meetings that are not inconsistent with these By-laws;
- (n) “officer” or “officers” means any 1 or more persons, respectively, who have been appointed as officers of the Board, and includes the Chair, Vice-Chair, and Communications Liaison;
- (o) “Regulations” means either or both of Regulated Health Professions General Regulations and the Medical Imaging and Radiation Therapy Regulations, as the context requires;
- (p) “Regulator” means the Nova Scotia Regulator of Medical Imaging and Radiation Therapy;
- (q) “Reserved Practice” means an activity, procedure or service within the scope of practice of practice of medical imaging and radiation therapy profession that:
 - i. is identified by the Board as necessitating additional education, training or other requirements beyond an entry to practice level; and
 - ii. requires approval of the Registrar before a registrant may engage in the activity, procedure or service as part of their individual scope of practice;
- (r) “Subsequent Board” includes each Board appointed after the expiry of the term of the Initial Board;
- (s) “Vice-Chair” means the Vice-Chair of the Initial Board or the Vice Chair of a Subsequent Board, as the context requires.

2. Corporate Seal

- 2.1 The seal of the Regulator shall have the words “Nova Scotia Regulator of Medical Imaging and Radiation Therapy” endorsed thereon.

3. Head Office

- 3.1 The head office of the Regulator shall be maintained within the province of Nova Scotia and located as to reasonably carry on the business of the Regulator.

4. Forms

- 4.1 Any forms not already specified in the Act or Regulations and necessary for the administration of the affairs of the Regulator shall be as approved by the Registrar.

Part 2 – Subsequent Boards**5. Composition of Subsequent Boards**

- 5.1 Each Subsequent Board following the expiry of the term of the Initial Board shall consist of 9 persons, including:
- (a) 5 registrant members; and
 - (b) 4 public representatives.
- 5.2 The quorum for a Subsequent Board is a majority of its members, including vacancies, which must include at least one public representative.
- 5.3 The officers of each Subsequent Board are the Chair, Vice-Chair, and Communications Liaison.
- 5.4 Registrant Board members of Subsequent Boards shall be appointed in accordance with the process set out in Article 18.
- 5.5 Officers of Subsequent Boards shall be appointed in accordance with the process set out in Article 19.
- 5.6 A Subsequent Board may revise the Board Competency Matrix.

6. Board Meetings

- 6.1 The Chair of the Board shall call general meetings of the Board, with no less than 4 general meetings in a fiscal year.
- 6.2 The Registrar shall ensure notice of the Board meetings is given to Board members at least 14 days in advance of the meeting, stating the time and whether the meeting is in- person, virtual, or hybrid.
- 6.3 The Chair of the Board may call a special Board meeting at any time as required by the Chair or upon the written request of one-third of Board members indicating the subject(s) to be considered.
- 6.4 At least 3 days prior to a special Board meeting, notice shall be issued to each Board member. The notice shall state the purpose of the meeting. No matter shall be discussed at any special Board meeting apart from that specified in the notice.
- 6.5 Meetings may be conducted by such electronic means as determined by the Board.

- 6.6 Notice of and voting at Board meetings may take place by such electronic means as determined by the Board.
- 6.7 Accidental omission to deliver notice of meetings does not invalidate proceedings at the meeting.
- 6.8 Notice requirements for meetings may be waived by unanimous vote of those participating in the meeting.
- 6.9 Board meetings will be conducted in accordance with these By-laws and any Meeting Rules approved by the Board.
- 6.10 Where not inconsistent with the By-laws or Meeting Rules, the Chair may make procedural rulings or determinations on any matter relevant to the meeting.

7. Chair

- 7.1 The Chair shall:
 - (a) unless otherwise delegated, preside at all meetings of the Board;
 - (b) act as the official spokesperson for the Board, unless this function is delegated; and
 - (c) perform all acts related to the office, including such functions as identified in a policy approved by the Board.
- 7.2 The Chair shall not vote at any meeting of the Board, except in the case of a tie, where the Chair shall cast the deciding vote.

8. Vice-Chair

- 8.1 The Vice-Chair shall:
 - (a) perform the duties of the Chair in the absence of the Chair; and
 - (b) perform all acts related to the office, including such functions as identified in a policy approved by the Board.

9. Communications Liaison

- 9.1 The Communications Liaison shall:
 - (a) prepare the minutes of Board meetings; and
 - (b) perform all acts related to the office, including such functions as identified in a policy approved by the Board.

10. Terms of Office for Registrant Board Members

- 10.1 The term of office of a registrant Board member is 3 years, excluding any term served on the initial Board.
- 10.2 A registrant may serve a maximum of two consecutive terms as a registrant Board member.

- 10.3 A registrant Board member who has served two consecutive terms on a Subsequent Board is not eligible for appointment for an additional term as a registrant Board member unless two years have expired since last serving on the Board.
- 10.4 Incumbent registrant Board members who are eligible and seek appointment for a second term will be subject to the same requirements and process as new candidates as set out in Article 18.
- 10.5 Where a registrant Board member's term expires, the position shall be filled in accordance with Article 18.
- 10.6 Notwithstanding Article 10.1, for the purpose of establishing a stagger in the terms of office for the registrant Board members appointed after the expiry of the term of the Initial Board, the Initial Board may establish a process to designate that, for one or more specified registrant Board members on the first Subsequent Board, their term of office is 1, 2 or 3 years.
- 10.7 The designation by the Initial Board of a term of office for a registrant Board member under Article 10.6 is only effective if made:
- (a) by a resolution of the Initial Board; and
 - (b) before the Initial Board appoints the registrant Board member.
- 10.8 Terms of office for the Chair, Vice-Chair, and Communications Liaison are not independent of the terms of a registrant Board member.

11. Terms of Office for Officers

- 11.1 Subject to Articles 13.3, 14.3, and 15.3, the term of office for the positions of Chair, Vice-Chair, and Communications Liaison on a Subsequent Board is one year.
- 11.2 A person is eligible to serve a maximum of two consecutive terms as Chair.
- 11.3 A person is eligible to serve a maximum of two consecutive terms as Vice-Chair.
- 11.4 A person is eligible to serve a maximum of two consecutive terms as Communications Liaison.
- 11.5 Time served by a registrant Board member in an Officer position counts toward the term limit for registrant Board members.

12. Removal of Officers and Registrant Board Members

- 12.1 Notwithstanding any other provisions of the By-laws, the Board may, by a two-thirds majority vote at any Board meeting or a special meeting called for the purpose, remove any registrant Board member from the Board before the expiration of their term of office, where the Board believes it is consistent with the objects of the Regulator to do so.
- 12.2 Notwithstanding any other provisions of the By-laws, the Board may, by a two-thirds majority vote at any Board meeting or a special meeting called for the purpose, remove any officer from their office before the expiration of their term of office, where the Board believes it is consistent with the objects of the Regulator to do so.

- 12.3 Examples where the Board may believe it consistent with the objects of the Regulator to remove a registrant Board member, a registrant officer or public representative from an officer position include, but are not limited to:
- (a) failing to attend 3 consecutive Board meetings, without sufficient cause accepted by the Board; and
 - (b) acting contrary to the Board Code of Conduct policy.
- 12.4 A decision of the Board under this Article is final.

Part 3 – Vacancies on Subsequent Boards

13. Vacancy of Chair

- 13.1 If the term of the Chair on a Subsequent Board is not completed, the Board shall appoint a replacement Chair from among the serving Board members
- 13.2 The replacement Chair will serve for the balance of the term of the outgoing Chair.
- 13.3 Notwithstanding Article 11.1, the Board may determine that the replacement Chair may serve an additional year as Chair in addition to the unexpired term of the outgoing Chair.
- 13.4 Where a person is appointed to fill a vacancy under Article 13.1, the unexpired term served to fill the vacancy does not count towards the term limit pursuant to Article 11.2.

14. Vacancy of Vice-Chair

- 14.1 If the term of the Vice-Chair on a Subsequent Board is not completed, the Board shall appoint a replacement Vice-Chair from among the serving Board members.
- 14.2 The replacement Vice-Chair shall serve for the balance of the unexpired term of the outgoing Vice-Chair.
- 14.3 Notwithstanding Article 11.1, the Board may determine that the replacement Vice-Chair may serve an additional year as Vice-Chair in addition to the unexpired term of the outgoing Vice-Chair.
- 14.4 Where a person is appointed to fill a vacancy under Article 14.1, the unexpired term served to fill the vacancy does not count towards the term limit pursuant to Article 11.3.

15. Vacancy of Communications Liaison

- 15.1 If the term of the Communications Liaison on a Subsequent Board is not completed, the Board shall appoint a replacement Communications Liaison from among the serving Board members.
- 15.2 The replacement Communications Liaison shall serve for the balance of the unexpired term of the outgoing Communications Liaison.
- 15.3 Notwithstanding Article 11.1, the Board may determine that the replacement Communications Liaison may serve an additional year as Communications Liaison in addition to the unexpired term of the outgoing Communications Liaison.

15.4 Where a person is appointed to fill a vacancy under Article 15.1, the unexpired term served to fill the vacancy does not count towards the term limit pursuant to Article 11.4.

16. Vacancy of Registrant Board Member on a Subsequent Board

16.1 A registrant Board member on a Subsequent Board shall be considered to have vacated their position on the Board in any of the following circumstances:

- (a) the member resigns from office;
- (b) the Board removes the member in accordance with Article 12 of these By-laws and Board policy;
- (c) the member ceases to be in good standing;
- (d) the member dies;
- (e) the member becomes an employee of the Regulator;
- (f) the provisions of subsection 8(2) of the Act apply; or
- (g) the member becomes an employee of or holds any position of responsibility with a professional association that may be incompatible with service on the Regulator's Board, as determined by the Board.

16.2 Where a vacancy occurs under this Article, that vacancy may be filled by Board with a registrant in good standing for the duration of the outgoing registrant Board member's term, in such manner as determined by the Board.

16.3 Where a registrant is appointed to fill a vacancy of an outgoing registrant Board member's term, the time spent filling such vacancy does not count as a term.

Part 4 – Appointments and Committees

17. Appointments Committee

17.1 The Board shall establish an Appointments Committee comprised of at least:

- (a) 2 registrants in good standing; and
- (b) 1 public representative.

17.2 No more than one Board member may serve on the Appointments Committee.

17.3 The members of the Appointments Committee shall hold office for such term as set by the Board who appoints them, which shall not be longer than 3 years. A member of the Appointments Committee may be appointed for one additional 3-year term by the Board.

17.4 The Board shall appoint one of the members as Chair of the Appointments Committee.

17.5 The Board shall approve the Terms of Reference of the Appointments Committee.

17.6 The Appointments Committee shall act in accordance with these By-laws and its Terms of Reference.

18. Appointment of Registrant Board Members

- 18.1 With respect to the appointment of registrant Board members to a Subsequent Board, the Appointments Committee shall perform the following functions, in accordance with the process and timelines approved by the Board that are not in conflict with these By- laws:
- (a) compare the composition of the Board with the Board Competency Matrix and identify the competencies, qualities, diversity, and other criteria needed to fill identified vacancies;
 - (b) seek candidates to fill current and/or anticipated registrant vacancies on the Board;
 - (c) assess the degree to which candidates fill the desired competencies, qualities, diversity, and other criteria identified by the Appointments Committee to align with the Board Competency Matrix;
 - (d) advance all candidates to the Board where the Appointments Committee is satisfied that a registrant is in good standing;
 - (e) make recommendations to the Board regarding candidates who in its opinion best meet the desired competencies, qualities, diversity, and other criteria identified by the Appointments Committee to align with the Board Competency Matrix; and
 - (f) perform such other functions related to the appointment of registrant Board members as identified by the Board.
- 18.2 In order for a candidate to be considered by the Appointments Committee, the candidate must submit a form signifying a willingness to serve as a registrant Board member and to abide by the Act, Regulations, By-laws and policies of the Regulator.
- 18.3 The form must be submitted within such timelines as approved by the Appointments Committee.
- 18.4 Any incumbent registrant Board member who wishes to be nominated for a subsequent term must submit their name and the approved form to the Appointments Committee, and if found eligible, the incumbent's name will be put forth with other nominees for the Board vacancies.
- 18.5 If the Appointments Committee determines a candidate is not eligible for nomination as a registrant Board member, the Appointments Candidate shall not advance the candidate's name to the Board.
- 18.6 Upon receipt from the Appointments Committee of the names of candidates pursuant to Article 18.1, the Board must consider the names of the candidates and determine which candidates shall be appointed to fill the number of anticipated vacancies on the Board.
- 18.7 For clarity, the registrant Board members of the first Subsequent Board shall be appointed by the Initial Board.
- 18.8 Decisions of the Appointments Committee and the Board under this Article are final.
- 18.9 A Board may approve revisions to the Board Composition Matrix from time to time on an as-needed basis.

19. Appointment of Officers

- 19.1 The Chair, Vice-Chair, and Communications Liaison shall be appointed by the Board members serving on the Board immediately prior to the end of the term of the incumbent Chair, Vice-Chair, and Communications Liaison.
- 19.2 The Chair, Vice-Chair and Communications Liaison shall be appointed in the following manner:
- (a) prior to the completion of the term of the incumbent Chair, Vice-Chair, and Communications Liaison, the Board shall request and encourage expressions of interest from Board members and the incoming Board members seeking to serve as the next Chair, Vice-Chair, or Communications Liaison;
 - (b) the Board shall
 - i. If need be, vet the candidates using such processes as the Board considers appropriate, including the Board Composition Matrix;;
 - ii. prepare a recommendation for the position of Chair, Vice-Chair, or Communications Liaison, as the case may be;
 - (c) if the Board approves the recommended candidate for the position of Chair, the candidate is deemed appointed, effective the day following the date the incumbent's term expires;
 - (d) if the Board approves the recommended candidate for the position of Vice-Chair, the candidate is deemed appointed, effective the day following the date the incumbent's term expires;
 - (e) if the Board approves the recommended candidate for the position of Communications Liaison, the candidate is deemed appointed, effective the day following the date the incumbent's term expires;
 - (f) if the Board does not approve the recommended candidate for Chair, Vice-Chair, or Communications Liaison, the Appointments Committee will prepare a new recommendation for the Board's consideration, and such process shall continue until a new Chair, Vice-Chair, or Communications Liaison, as the case may be, are appointed;
 - (g) if there are no expressions of interest received regarding the positions of Chair, Vice-Chair, or Communications Liaison from eligible current or incoming Board members, the Board must appoint individuals from among the eligible current and incoming Board members to fill these positions in such manner as the Board determines.
- 19.3 The Board may request the assistance of the Appointments Committee with respect to any and all steps of the appointment process for officers as set out in Article 19.2.
- 19.4 The Board may make appointment rules and set such deadlines as it deems appropriate, as long as such rules are not inconsistent with these By-laws.
- 19.5 A decision of the Board under this Article is final.

20. Appointment of Registrants to Statutory Committees

- 20.1 With respect to the appointment of registrants to Committees of the Regulator, the Appointments Committee shall:
- (a) seek candidates to fill current and/or anticipated registrant vacancies on a Committee of the Regulator;
 - (b) advance all candidates to the Board where the Appointments Committee is satisfied that a registrant is in good standing; and
 - (c) perform such other functions related to the appointment of registrants to Committees of the Regulator as identified by the Board.
- 20.2 In order for a registrant to be considered by the Appointments Committee, the registrant must submit a form approved by the Appointments Committee signifying a willingness to serve as a Committee member and to abide by the Act, Regulations, By-laws and policies of the Regulator.
- 20.3 The form must be submitted within such timelines as approved by the Appointments Committee.
- 20.4 If the Appointments Committee determines a registrant is not eligible for nomination as a Committee member, the Appointments Committee shall not advance the registrant's name to the Board.
- 20.5 A decision of the Appointments Committee to recommend names to the Board is final.
- 20.6 Upon receipt from the Appointments Committee of the names of registrants pursuant to Article 20.1, the Board must consider the names of the registrants and determine which registrants shall be appointed to fill the number of anticipated registrant vacancies on a Committee of the Regulator.
- 20.7 Decisions of the Appointments Committee and the Board under this Article are final.

21. Appointment of Public Representatives to Statutory Committees

- 21.1 With respect to the appointment of public representatives to Committees of the Regulator, the Appointments Committee shall:
- (a) seek members of the public to fill current and/or anticipated public representative vacancies on a Committee of the Regulator;
 - (b) publicly advertise to invite expressions of interest in serving as a public representative on a Committee of the Regulator for at least 30 days, except when the Board seeks to appoint a public representative from a pool established under Section 25 of the Act and section 16(2) of the Regulated Health Professions General Regulations;
 - (c) advance all expressions of interest to the Board;
 - (d) perform such other functions related to the appointment of public representative Committee members as identified by the Board.

- 21.2 Except when the Board seeks to appoint a public representative from a pool established under Section 25 of the Act, in order for a member of the public to be considered by the Appointments Committee, the member of the public must submit a form approved by the Appointments Committee signifying a willingness to serve as a Committee member and to abide by the Act, Regulations, By-laws and policies of the Regulator.
- 21.3 The form must be submitted within such timelines as approved by the Appointments Committee.
- 21.4 Upon receipt from the Appointments Committee of the expressions of interest pursuant to Article 21.1, the Board must consider the names and determine which members of the public shall be appointed to fill the number of anticipated public representative vacancies on a Committee of the Regulator.
- 21.5 Decision of the Appointment Committee and the Board under this Article are final.

22. Governance Committee

- 22.1 The Board shall establish a Governance Committee comprised of at least:
- (a) 2 registrants in good standing;
 - (b) 1 public representative.
- 22.2 No more than 1 Board member may serve on the Governance Committee.
- 22.3 The Board shall appoint members of the Governance Committee for a three-year term. Members of the Governance Committee are eligible for reappointment for a second term.
- 22.4 The Board shall appoint one of the members as Chair of the Governance Committee.
- 22.5 The Board shall approve Terms of Reference for the Governance Committee.
- 22.6 The Governance Committee shall act in accordance with its Terms of Reference approved by the Board.

23. Regulator Risk Assessment Committee

- 23.1 The Board shall establish a Regulator Risk Assessment Committee comprised of at least:
- (a) 2 registrants in good standing;
 - (b) 1 public representative.
- 23.2 No more than 1 Board member may serve on the Regulator Risk Assessment Committee.
- 23.3 The Board shall appoint members of the Regulator Risk Assessment Committee for a three-year term. Members of the Regulator Risk Assessment Committee are eligible for reappointment for a second term.
- 23.4 The Board shall appoint one of the members as Chair of the Regulator Risk Assessment Committee.
- 23.5 The Board shall approve Terms of Reference for the Regulator Risk Assessment Committee.

- 23.6 The Regulator Risk Assessment Committee shall act in accordance with its Terms of Reference approved by the Board.

Part 5 – Scope of Practice

24. Scope of Practice for Diagnostic Medical Sonographers

- 24.1 A diagnostic medical sonographer (cardiac, general, or vascular) may engage in the diagnostic medical sonography aspects of the practice of medical imaging and radiation therapy that are:

- (a) taught in approved education programs for diagnostic medical sonographers (cardiac, general, or vascular); or
- (b) set out in the competency frameworks, standards of practice, and practice guidelines for diagnostic medical sonographers (cardiac, general, or vascular) as approved by the Board.

- 24.2 The scope of practice of diagnostic medical sonographers (cardiac, general, or vascular) as described in Article 24.1 includes the safe and competent performance of activities including but not limited to the following:

- (a) application of high frequency sound waves to perform procedures and produce high quality diagnostic images;
- (b) education, advocacy and application of ultrasound field safety in the protection of patients, health care professionals and the public;
- (c) responsibility for ensuring appropriate patient assessment and management in relation to care
- (d) use of pharmaceuticals in the performance of diagnostic and therapeutic interventions to enhance images; and
- (e) evaluation and interpretation of diagnostic images distinguishing artifact from pathological process.

- 24.3 The scope of practice for diagnostic medical sonographers (cardiac, general, or vascular) also includes relevant research, education, inter-professional collaboration, consultation, management, administration, advocacy, regulation, or system development relevant to the above.

- 24.4 For clarity, diagnostic medical sonographers may practise only within the scope set out in Articles 24.1, 24.2, and 24.3, and only as it applies to the specific category of their licence (cardiac, general, or vascular).

25. Scope of Practice for Magnetic Resonance Technologists

- 25.1 A magnetic resonance technologist may engage in those aspects of the practice of medical imaging and radiation therapy that are:

- (a) taught in approved education programs for magnetic resonance technologist; or
- (b) set out in the competency framework, standards of practice, and practice guidelines

for magnetic resonance technologists as approved by the Board.

- 25.2 The scope of practice of magnetic resonance technologists as described in Article 25.1 includes the safe and competent performance of activities including but not limited to the following:
- (a) application of magnetic fields to perform procedures and produce high quality diagnostic images;
 - (b) education, advocacy and application of magnetic field safety in the protection of patients, health care professionals and the public;
 - (c) responsibility for ensuring appropriate patient assessment and management in relation to care
 - (d) use of pharmaceuticals in the performance of diagnostic and therapeutic interventions to enhance magnetic resonance images; and
 - (e) evaluation and interpretation of diagnostic images distinguishing artifact from pathological process.
- 25.3 The scope of practice for magnetic resonance technologists also includes relevant research, education, inter-professional collaboration, consultation, management, administration, advocacy, regulation, or system development relevant to the above.

26. Scope of Practice for Nuclear Medicine Technologists

- 26.1 A nuclear medicine technologist may engage in those aspects of the practice of medical imaging and radiation therapy that are:
- (a) taught in approved education programs for nuclear medicine technologists; or
 - (b) set out in the competency framework, standards of practice, and practice guidelines for nuclear medicine technologists as approved by the Board.
- 26.2 The scope of practice of nuclear medicine technologists as described in Article 26.1 includes the safe and competent performance of activities including but not limited to the following:
- (a) application of ionizing radiation including radionuclides to produce high quality images, and for the treatment of disease;
 - (b) education, advocacy and application of radiation safety in the protection of patients, health care professionals and the public;
 - (c) responsibility for ensuring appropriate patient assessment and management in relation to care
 - (d) preparation and use of radiopharmaceuticals and pharmaceuticals in the performance of diagnostic studies and therapeutic interventions and;
 - (e) evaluation and interpretation of diagnostic images distinguishing artifact from pathological process.
- 26.3 The scope of practice for nuclear medicine technologists also includes relevant research,

education, inter-professional collaboration, consultation, management, administration, advocacy, regulation, or system development relevant to the above.

27. Scope of Practice for Radiation Therapists

27.1 A radiation therapist may engage in those aspects of the practice of medical imaging and radiation therapy that are:

- (a) taught in approved education programs for radiation therapists; or
- (b) set out in the competency framework, standards of practice, and practice guidelines for radiation therapists as approved by the Board.

27.2 The scope of practice of radiation therapists as described in Article 27.1 includes the safe and competent performance of activities including but not limited to the following:

- (a) application of ionizing radiation for prescribed treatment and to produce high quality planning images;
- (b) education, advocacy and application of radiation safety in the protection of patients, health care professionals and the public;
- (c) responsibility for ensuring appropriate patient assessment and management in relation to care
- (d) use of pharmaceuticals in the performance of therapeutic interventions to enhance treatment and planning imaging; and
- (e) evaluation of treatment and interpretation of planning images

27.3 The scope of practice for radiation therapists also includes relevant research, education, inter-professional collaboration, consultation, management, administration, advocacy, regulation, or system development relevant to the above.

28. Scope of Practice for Radiological Technologists

28.1 A radiological technologist may engage in those aspects of the practice of medical imaging and radiation therapy that are:

- (a) taught in approved education programs for radiological technologists; or
- (b) set out in the competency framework, standards of practice, and practice guidelines for radiological technologists as approved by the Board.

28.2 The scope of practice of radiological technologists as described in Article 28.1 includes the safe and competent performance of activities including but not limited to the following:

- (a) application of ionizing radiation to perform procedures and produce high quality diagnostic images;
- (b) education, advocacy and application of radiation safety in the protection of patients, health care professionals and the public;
- (c) responsibility for ensuring appropriate patient assessment and management in

relation to care

- (d) use of pharmaceuticals in the performance of diagnostic and therapeutic interventions to enhance images; and
- (e) evaluation and interpretation of diagnostic images distinguishing artifact from pathological process.

28.3 The scope of practice for radiological technologists also includes relevant research, education, inter-professional collaboration, consultation, management, administration, advocacy, regulation, or system development relevant to the above.

29. Cross-Practice Authorization

29.1 The Board may identify any activity, procedure or service within the scope of practice of one licensing category that a registrant licensed in a separate licensing category may perform as cross-practice.

29.2 Where the Board identifies a cross-practice, the Board shall determine if practice standards are required to establish expectations for registrants in the performance of such cross-practice.

29.3 For clarity, a registrant licensed in one licensing category who performs an activity, procedure or service within the scope of practice of another licensing category is not considered to be engaging in cross-practise if the activity, procedure or service is not identified by the Board pursuant to Article 29.1.

29.4 Where the Board determines that practice standards are required the Board shall approve such practice standards.

29.5 The Board may establish any of the following:

- (a) restrictions and conditions under which an authorized registrant must practise when engaging in cross-practice, including in relation to the practice setting and supervision requirements;
- (b) application requirements, including forms and fees;
- (c) educational requirements, including approved institutions or programs;
- (d) examination requirements;
- (e) currency of practice requirements;
- (f) continuing competence requirements;
- (g) standards of practice;
- (h) any other requirements the registrant must meet to ensure that they possess the capacity, competence and character to safely and ethically engage in cross-practice.

29.6 The Registrar shall establish the procedure for a registrant to apply for approval to engage in cross-practice.

- 29.7 When the Registrar approves a registrant to engage in cross-practice, the Registrar will publish the following information on the registrant's public directory on the Regulator's website:
- (a) the nature of the cross-practice;
 - (b) any titles or permits authorized by the Registrar to signify authorization to engage in the cross-practice; and
 - (c) any conditions or restrictions respecting the approval.
- 29.8 Despite this Article, any requirements for application for approval to engage in cross-practice may be waived if it is determined by the Registrar to be in the public interest to do so.
- 29.9 If the Registrar denies an application from a registrant to engage in cross-practice, the Registrar shall advise the applicant of a right to seek review of the Registrar's decision by the Registration and Licensing Review Committee, if the registrant provides a notice in writing to the Registrar to this effect within 30 days of the Registrar's decision.
- 29.10 The procedure for a review of a decision rendered by the Registrar with respect to cross-practice approval under this Article shall follow the procedure set out in sections 51 - 58 of the Act as nearly as possible with necessary adaptations.
- 29.11 A decision of the Registration and Licensing Review Committee under this article is final.

30. Reserved Practice

- 30.1 The Board may identify any activity, procedure or service within the scope of practice of medical imaging and radiation therapy as a reserved practice.
- 30.2 Where the Board identifies a reserved practice, the Board shall determine if practice standards are required to establish expectations for registrants in the performance of such reserved practice.
- 30.3 Where the Board determines that practice standards are required under Article 30.2, the Board shall approve such practice standards.
- 30.4 Where a reserved practice has been identified by the Board under Article 30.1, the Board must approve the additional requirements beyond entry to practice competencies that must be completed by a registrant before the registrant is approved to engage in the reserved practice.
- 30.5 A registrant must obtain the approval of the Registrar prior to engaging in a reserved practice.
- 30.6 The Registrar shall establish the procedure for applying for approval to engage in a reserved practice.
- 30.7 When the Registrar approves a registrant to engage in a reserved practice, the Registrar will publish the following information on the registrant's public directory on the Regulator's website:
- (a) the nature of the approved activity, procedure or service;
 - (b) any titles or permits authorized by the Registrar to signify approval to engage in

the approved activity, procedure or service; and

- (c) any conditions or restrictions respecting the approved activity, procedure, or service.
- 30.8 If the Registrar denies an application from a registrant to engage in a reserved practice, the Registrar shall advise the applicant of a right to seek review of the Registrar's decision by the Registration and Licensing Review Committee, if the registrant provides a notice in writing to the Registrar to this effect within 30 days of the Registrar's decision.
- 30.9 The procedure for a review of a decision rendered by the Registrar with respect to Reserved Practice under this Article shall follow the procedure set out in sections 51 - 58 of the Act as nearly as possible with necessary adaptations.
- 30.10 A decision of the Registration and Licensing Review Committee under this Article is final.

Part 6 – Registration, Licensing and Competence

31. Registration and Licensing Examinations

- 31.1 The examinations required for registration and licensing as a diagnostic medical sonographer, medical resonance technologist, nuclear medicine technologist, radiological technologist, or radiation therapist are the entry to practice examinations approved by the Board.

32. Continuing Competence Program

- 32.1 The Board shall approve a continuing competence program for each licensing category.
- 32.2 The Board shall approve reporting requirements for registrants respecting the continuing competence program.
- 32.3 A registrant must retain documentation and records related to continuing competence program activities for a minimum of three years following the submission deadline, where applicable.
- 32.4 For the purpose of verifying a registrant's compliance with the continuing competence program, the Regulator may at any time conduct an audit of the documentation and records kept under Article 32.3.

33. Practice Hours

- 33.1 A registrant must keep a record of the hours that the registrant practised in the immediately previous five years.
- 33.2 The Regulator may at any time conduct an audit of records kept under Article 33.1.

34. Licensing and Renewal Criteria

- 34.1 If proof of registration or licensing criteria was not submitted at the time of application for registration, licensing or renewal, a registration and licensing decision maker may request the registrant submit proof that they meet the criteria for registration, licensing or renewal, upon applying for a licence or renewal.

35. Currency of Practice

- 35.1 A registrant may be licensed in more than one licensing category. A registrant must remain current in all licensing categories for which they are licensed in accordance with this section.
- 35.2 Practice hours in one licensing category do not count toward practice hours in another licensing category.
- 35.3 An applicant for a licence or renewal of a licence must provide satisfactory proof to the registration and licensing decision maker that the applicant meets at least one of the following currency of practice requirements, unless exempted from these requirements in accordance with a policy approved by the Board:
- (a) current licensure in an equivalent category of licence in another Canadian jurisdiction;
 - (b) for a registrant licensed in only one licensing category, engaged in practice for a minimum of 1200 hours in the 5-year period prior to the date of application for a licence or renewal of a licence;
 - (c) for a registrant licensed in two licensing categories, engaged in practice for a minimum of 1200 hours in the first licensing category and 400 hours in the second licensing categories in the 5-year period prior to the date of application for a licence or renewal of a licence;
 - (d) for a registrant licensed in only one licensing category, engaged in practice for a minimum of 540 hours in the one year period prior to the date of application for a licence or renewal of a licence;
 - (e) for a registrant licensed in two licensing categories, engaged in practice for a minimum of 540 hours in the first licensing category and 180 hours in the second licensing category in the one year period prior to the date of application for a licence or renewal of a licence;
 - (f) graduated from an approved education program within 3 years prior to the date of application for a licence or renewal of a licence;
 - (g) graduated from an international education program assessed as substantially similar to an approved education program by the registration and licensing decision within 3 years prior to the date of application for a licence or renewal of a licence; or
 - (h) successfully completed a re-entry program, competence assessment and/or bridging education within the 18 months prior to the date of application for a licence or renewal of a licence.

36. Graduate

- 36.1 An applicant granted conditional registration and licensing pursuant to subsections 13(4) and 14(4) of the Medical Imaging and Radiation Therapy Regulations who has not yet passed the examinations for registration or licensing must use the title "Graduate" in addition to title corresponding to their category of licensing. For example:
- (a) Diagnostic Medical Sonographer (Graduate);
 - (b) Magnetic Resonance Technologist (Graduate);

- (c) Nuclear Medicine Technologist (Graduate);
- (d) Radiation Therapist (Graduate);
- (e) Radiological Technologist (Graduate).

Part 7 – Standards and Enforcement

37. Code of Ethics

- 37.1 The Code of Ethics approved under the Act is the Code approved by the existing regulator prior to the establishment of the Nova Scotia Regulator of Medical Imaging and Radiation Therapy, and may be revised or replaced by the Board, from time to time, as necessary.

38. Standards of Practice

- 38.1 The Standards of Practice approved under the Act are those approved by the existing regulator prior to the establishment of the Nova Scotia Regulator of Medical Imaging and Radiation Therapy, and may be revised or replaced by the Board, from time to time, as necessary.

39. Competencies

- 39.1 The Competencies approved under the Act are those approved by the existing regulator prior to the establishment of the Nova Scotia Regulator of Medical Imaging and Radiation Therapy, and may be revised or replaced by the Board, from time to time, as necessary.

40. Transcripts

- 40.1 A registrant who requests that a transcript be made of a regulatory process is responsible for paying the full cost of the transcript.

41. Fines and Penalties

- 41.1 The fine that may be imposed for the reinstatement of a suspended licence in accordance with section 154 of the Act shall be an amount outlined in policy approved by the Board.
- 41.2 The fine that may be imposed by the Registrar under section 155 of the Act for a registrant who has practised without a licence shall be an amount outlined in policy approved by the Board.
- 41.3 Where a registrant fails to maintain required professional liability insurance while holding a license, the Registrar may impose a fine as set by the Board and outlined in the policy approved by the Board.

Part 8 – Practice Exemption

42. Practice Exemption

- 42.1 In addition to the services set out in Section 164 of the Act and 27 of the Medical Imaging and Radiation Therapy Regulations, a registered nurse licensed by the Nova Scotia regulatory body of nursing may practice diagnostic medical sonography if they meet all of the following requirements:

- (a) A person who
 - i. was employed to perform diagnostic medical sonography limited to fetal assessment at the Izaak Walton Killiam Health Centre immediately before the effective date of these regulations, and
 - ii. continues to be employed to perform diagnostic medical sonography limited to fetal assessment at the Izaak Walton Killiam Health Centre on and after June 1, 2026.
- (b) they meet all of the following requirements:
 - i. have professional liability insurance or another form of malpractice coverage or liability protection in the form and amount set by the Nova Scotia regulatory body for nursing,
 - ii. have no outstanding complaints, prohibitions, conditions or restrictions originating from any registration or licensing authority that would preclude them, in the opinion of the Nova Scotia regulatory body of nursing, from engaging in fetal assessment sonography,
- (c) any other requirements the Nova Scotia regulatory body of nursing determines to be necessary.

Part 9 – Initial Board

43. Initial Board

- 43.1 The officers of the Initial Board are the Chair and Vice-Chair of the Legacy Board and the Communications Liaison who was the Secretary of the Legacy Board.
- 43.2 The terms of office for the Chair, Vice-Chair, and Communications Liaison on the Initial Board are the same as the term of the Initial Board.
- 43.3 The quorum for the Initial Board is a majority of its members, which must include at least one public representative.
- 43.4 The terms of office served by registrant Board members on the Initial Board do not count towards the term limits set out in Part 2 – Subsequent Boards of these By- laws.
- 43.5 The Officer terms on the Initial Board do not count towards Officer term limits set out in Part 2 – Subsequent Boards of these bylaws.
- 43.6 The Initial Board shall develop and approve the Board Competency Matrix for the first Subsequent Board prior to the expiry of the term of the Initial Board.

44. Vacancy on Initial Board

- 44.1 Where a vacancy occurs due to the resignation, removal or otherwise of the Chair of the Initial Board, the Vice-Chair shall assume the role of Chair for the duration of the Initial Board's term. If the Vice-Chair is unwilling or unable to assume the role of Chair, the Initial Board shall appoint a Chair from amongst their number for the duration of the Initial Board's term, in such manner as determined by the Initial Board.

- 44.2 Where a vacancy occurs due to the resignation, removal or otherwise of the Vice-Chair of the Initial Board, that vacancy may be filled by the Initial Board with a member from amongst their number for the duration of the Initial Board's term, in such manner as determined by the Initial Board.
- 44.3 Where a vacancy occurs due to the resignation, removal or otherwise of the Communications Liaison of the Initial Board, that vacancy may be filled by the Initial Board with a member from amongst their number for the duration of the Initial Board's term, in such manner as determined by the Initial Board.
- 44.4 Where a vacancy occurs due to the resignation, removal or otherwise of a registrant Board member of the Initial Board who is not an officer, prior to the expiration of the term of the Initial Board, that vacancy may be filled by the Initial Board with a registrant in good standing for the duration of the Initial Board's term, in such manner as determined by the Initial Board.