

HORRY-GEORGETOWN TECHNICAL COLLEGE

Radiologic Technology Program

Master Plan of Clinical Education

Class of 2023-2025



Marion Medical Center

Table of Contents

| | |
|---|------------|
| Master Plan Summary | page 1 |
| Rules and Guidelines | page 2 |
| Attendance Policies | page 2 |
| Clinical Times | page 2 |
| Clinical Attendance Policy | page 3 |
| Reporting Absences and Tardies | page 3 |
| Clinical Training Make-up Policy | page 4 |
| Corrective Disciplinary Procedures | page 5 |
| Methods of Clinical Evaluation | page 6 |
| Clinical Grading Scale | page 7 |
| Semester Clinical Requirements | page 8- 9 |
| Clinical Evaluation Outcomes | page 10 |
| Student Site Orientation Checklist | page 11-12 |
| Room/Equipment Competency | page 13-14 |
| <u>Competency Forms</u> | |
| General Radiography | page 15 |
| Contrast Competency | page 16-17 |
| Pediatric Competency | page 18-19 |
| Mobile Competency | page 20-21 |
| Special Procedure Checklist | page 22 |
| Surgical Checklist- C-Arm- Ortho | page 23 |
| Surgical Checklist- C-Arm- Non-Ortho | page 24 |
| Arthrogram/Myelogram Checklist | page 25-26 |
| Special Procedure Competency | page 27 |
| Sterile Tray/Technique | page 28-29 |
| CT Competency | page 30 |
| Terminal Competency Explanation | page 31-32 |
| Terminal Competency Evaluation | page 33 |
| Professional Development | |
| 1 st through 6 th semester PD form | page 34-36 |
| Professional Development Progress Sheets | page 37 |
| Venipuncture Policy | page 38 |
| Venipuncture Competency | page 39 |
| Clinical Progression Policy | page 40 |
| ARRT Required Competencies | page 41-43 |
| <u>ARRT Radiography Didactic and Clinical Competency Requirements</u> | Appendix |
| A | |
| <u>ARRT Content Specifications for the Examination in Radiography</u> | Appendix B |
| <u>HGTC Drug Screen and Student Background Check Policy</u> | Appendix C |

HORRY-GEORGETOWN TECHNICAL COLLEGE

RADIOLOGIC TECHNOLOGY PROGRAM

MASTER PLAN SUMMARY OF CLINICAL EDUCATION

Clinical education takes place in various health care settings. It begins with observation of procedures and gradually the student learns to assist in procedures. After completing didactic sessions and laboratory **practice/ proficiencies**, the student may perform radiographic examinations unassisted, with **direct supervision** of a qualified radiographer. After a determined number of exams have been completed, students may request a clinical competency evaluation. Upon successful completion of the **competency**, students can perform examinations with **indirect supervision**.

*** At no time can a student perform portable exams outside of the department, or Operating room procedures without direct supervision: ARRT certified technologist MUST be present during examination.**

Throughout the 6 semesters, students gradually become competent in more complicated procedures, until all program and ARRT competency requirements must be successfully completed to be eligible for program completion. Note during 5th and 6th semesters, students must perform a terminal competency as noted on the examination form.

Prior to successfully completing competency evaluations in any given area, a student must be directly supervised at all times by an ARRT qualified radiographer. Direct supervision is defined by the Standards of an Accredited Program in Radiologic Sciences, as follows:

Until the student achieves and documents competency in any given procedure, all clinical assignments shall be carried out under the direct supervision of qualified radiographers. The parameters of direct supervision are:

1. A qualified radiographer reviews the request for examination in relation to the student's achievement
2. A qualified radiographer evaluates the condition of the patient in relation to the students' knowledge
3. A qualified radiographer is present during the performance of the examination
4. A qualified radiographer reviews and approves the radiographs

After demonstrating competency, students may perform procedures with indirect supervision. "Indirect supervision is defined as supervision provided by a qualified radiographer immediately available to assist students regardless of the level of student achievement. Immediately available is interpreted as the presence of a qualified radiographer adjacent to the room or location where radiographic procedures are being performed. This means that a qualified radiographer is within hearing distance, with no electronic means of contact, such as beepers or phones acceptable."

This applies to all areas where ionizing radiation equipment is in use.

To ensure continued competence, students may AND WILL be re-comped at any time during their clinical education.

In order to receive and maintain accreditation status, these standards must be adhered to at all times.

RULES AND GUIDELINES FOR CLINICAL EDUCATION

Radiography students are under the direct supervision of the clinical preceptor/instructor for all educational functions within the clinical affiliate. Students will also receive instruction and directions from the radiographer to whom they are assigned. In turn, the radiographer provides input to the clinical preceptor regarding the student's progress. Students are not to perform procedures on patients without proper instruction and supervision as described in the Joint Review Committee Standards of an Accredited Program in radiography. Students are to participate in a team effort with staff to perform department activities as needed; such as maintaining department cleanliness, replenishing supplies, and transporting patients as appropriate. Students are to participate in planned learning activities as assigned by the Clinical preceptor.

ATTENDANCE POLICIES

The daily times of attendance will vary depending on what semester you are enrolled. Total hours of class time and clinical education will not exceed 40 hours per week.

Absence and/or tardiness will have a detrimental effect on attainment of clinical and professional goals and will reflect in the student's performance. Tardiness is unprofessional and will be documented in your professional development (PD form). Tardy is one minute after the scheduled start time. Three tardies will result in a written warning, a charged absence and make up day. This day must be made-up regardless of total days absent! A Fourth tardy will warrant a Final written warning and another make-up day. A Fifth tardy will warrant a second Final written warning and dismissal from the program.

Two (2) days per semester are allotted for sickness per 15-week semester.

* Absences must be reported to the CP and CC 30 minutes before the clinical assignment is set to begin.

- **Failure to report to the CI and the CC 30 minutes prior to start time will result in a mandatory make-up day regardless of amount of previous days absent. No Exceptions!**

If the site clinical preceptor is not available at time of call, the student must call back and speak with the CP. Any illness of more than 2 days may require a written explanation from a physician. Absences past the allowed 2 must be made up. The make-up time must be approved by the clinical preceptor and the clinical coordinator and be performed in the same semester as absence.

Excessive tardiness and any unexcused absences shall be cause for disciplinary action up to and including dismissal from the program.

Falsifying attendance is grounds for immediate dismissal.

Make- up time is limited to semester breaks and final exam week. Make up time must be completed by the end of the semester. Failure to do so may result in an incomplete for the course. Clinical make-up time must be approved by the Clinical Coordinator and Clinical Preceptor.

In the event that a student receives the grade of Incomplete, they have a time limit of 2 weeks to make-up any missed work/time.

CLINICAL TIMES

During semester 1 students will attend clinical on Tuesday and Thursday, 8:00am - 3:00pm. These hours are mandatory and are not subject to change for any reason. Semesters 2 & 3 hours are: Tuesday and Thursday, 8:00am - 3:30pm.

During semesters 4 – 6, the student will attend clinical Monday, Wednesday, and Friday from 8:00am - 4:00pm. In addition, during the 4th - 6th semester students must rotate through a weekend shift (Saturday and Sunday) with scheduled compensatory time off the following week. Time off must be approved by the course instructor and clinical preceptor. Students must also rotate through a week

of evening shifts in the 4th through 6th semester. The hours will be Monday, Wednesday and Friday from 1:00 – 9:00pm.

CLINICAL ATTENDANCE POLICY

Each semester the number of days off allowed will be determined and discussed in the corresponding Instructional Package. This number will be determined based on 90% attendance. Depending on the total number of days for each semester; verbal, written, and final warning will be documented. Any absence after a final warning will result in termination from the radiography program.

NO EXCEPTIONS!!!

3 tardies to class or clinical assignments will be equal to one absence and will be counted as total days absent.

SUMMER ATTENDANCE POLICY

The student may not exceed 2 absences. Any absence more than 1 must be made-up. 1 absence will result in a written warning. The second absence will result in a final written warning and the third in dismissal from the radiologic technology program. During the summer, absenteeism is stricter because there is limited time to achieve the semester's learning outcomes.

Make-up time is limited to school breaks and must be pre-approved by the clinical coordinator and the clinical preceptor.

Excessive tardiness will NOT be tolerated. Tardy Policy: 2 tardies result in a verbal warning and will count as one absence. A 3rd tardy will result in a written warning. A 4th tardy will result in a final written warning, charged with a second absence, and a makeup day. Finally, a 5th tardy will result in a second final written warning with dismissal from the program.

REPORTING ABSENCES And TARDINESS

If it is necessary for you to be absent on a clinic day, you **MUST** call:

1. The clinical preceptor at your assigned site – if not available at time of call, leave a message and call later and speak directly with the Clinical Preceptor.
2. Contact the course instructor via telephone, Remind App and or email.

AND

Contact -The clinical coordinator office: 843-477-2180 (casey.mocarski@hgtc.edu) or program director: 843-839-1149 (douglas.gleasman@hgtc.edu)

Leave a voice message

You must call 30 minutes prior to the scheduled start time.

Failure to call these 3 people at the correct time **WILL** result in a mandatory make-up day regardless of the total days missed.

(1) no-call/no-show will result in a Final written warning; 2 no-calls/no-shows will result in a second final written warning and dismissal from the program.

NO EXCEPTIONS!!!!

While a student in the radiology program, a second final warning letter is grounds for immediate dismissal!

CLINICAL TRAINING MAKE-UP POLICY

This policy serves to identify the procedure and criteria for making up days in excess of the 2 allotted for illness during the academic semester.

Early departure from the assigned clinic area for any reason other than illness prior to the completion of the assigned clinic hours will be unacceptable and will result in progressive discipline. The 1st incident will result in a written warning. With a 2nd incident, the student will receive a final written warning and a 3rd incident will result in dismissal from the program

Sick leave days which exceed the allotted (2) days must be verified by the student submitting a doctor's note verifying the reason for the absence. Students must complete all clinical education requirements to receive the recommendation of the program director to sit for the American Registry of Radiologic Technologists Certification Exam. Missing clinic means you will not be able to accomplish your clinical objectives.

Any time taken which exceeds the allowed 2 days must be made-up before a final grade will be issued.

The following criteria will serve as guidelines for the student to reestablish their good standing in the clinical phase of their educational process.

1. All make-up time must be pre-approved and have the make-up day form filled out with the signatures of the Clinical Preceptor and Clinical Coordinator. The course instructor must be made aware of the date and time of the pre-approved make-up day. Failure to notify the course instructor will result in the make-up day not counting towards completing all course requirements.
2. If the student misses the assigned make-up time, they will be assigned an additional make-up day and receive a Final written warning.
3. Make-up time will be made up within the same semester of the missed day.
4. Make-up time is limited to vacation time and Final exam week, and scheduling is dependent on HGTC faculty availability.
5. The missed time is to be made-up in one block. Ex.- If a (7)-hour day is missed, the time must be made-up in a (7)-hour block.
6. The student must comply with the programs dress code on days the time is being made up.
7. During the 4th through 6th semester, if an evening or weekend rotation is missed, the student must make up an evening or weekend, regardless of total days absent.

These guidelines will be utilized by the Radiologic Technology program to provide the student with a mechanism to complete their clinical education when students' attendance has been affected by adverse circumstances.

PROGRESSIVE/CORRECTIVE DISCIPLINARY PROCEDURES

The following progressive guidelines are followed for corrective disciplinary procedures:

Level One

The first step in corrective discipline is a **verbal warning**. The reason for the warning and the result if the behavior is repeated will be communicated to you. These warnings are routinely documented.

Level Two

A **written warning** or second Level warning is the next step in the corrective discipline procedure. The reason for the warning is usually the result of the same or similar behavior being repeated will be documented in the students your personal file. The program director and/or clinical coordinator will be notified of this event.

Level Three

A **final, written warning** involving the same offense, or a variety of offenses will be documented. The program director and/or clinical coordinator will be immediately notified of this event for evaluation and recommendation of further action. A level three warning will constitute grounds for immediate dismissal from the clinical affiliate and/or dismissal from the program.

- At any time while a student in the radiology program, (2) final warning letters is grounds for immediate dismissal.

DISCIPLINARY PROCEDURES and SUSPENSION

Some offenses are serious enough to be cause for immediate dismissal from the program. Unprofessional, unethical, or amoral conduct is included, but is not limited to:

1. Breaching patient confidentiality, revealing personally identifiable facts obtained as a result of a student patient relationship or access to patient records, without prior consent of the patient.
2. Performing a task/examination which the student knows or has reason to know that he/she is not competent to perform unsupervised.
3. Insubordination - Not accepting constructive criticism and/or acting in an unprofessional manner.
4. Reporting to the clinical site under the influence or with the smell of alcohol or drugs; or carrying out student responsibility while the ability to perform is impaired by alcohol, drugs, or mental disability.
5. Impersonating another health care practitioner.
6. Independently delegating a task assigned to him/her by an instructor or supervisor to another individual.
7. Willfully arguing with, harassing, abusing, or intimidating another individual.
7. Refusal to follow instructions or to complete an assignment.
8. Dishonesty, including theft, plagiarism, cheating or falsification of records
9. Carelessness in handling drugs or drug records.
10. Conduct endangering the welfare of patients, employees, or visitors.
11. Possession of dangerous weapons on hospital premises.
12. Fighting, assault and battery.

13. Solicitation, posting or distributing articles/literature of any nature on hospital premises without approval.

METHODS OF CLINICAL EVALUATION

Clinical Competency/Professional Development

The student begins his/her clinical participation by assisting the radiographer in the performance of radiographic procedures. The rate of student progress depends on the students' ability to comprehend and perform the various tasks required by the program.

As the student becomes experienced in a given procedure or procedures, he/she will perform the procedure unassisted and directly supervised by the radiographer.

Clinical competencies may only be performed after the didactic instruction and a successful Lab proficiency.

JRCERT Standard 5.4 The program assures that medical imaging procedures are performed under the appropriate supervision of a qualified radiographer.

Direct Supervision- a registered radiologic technologist must be in the room or immediately outside the room and the RT must watch the student perform the exam.

The qualified radiographer must:

- review the procedure in relation to the student's achievement
- evaluate the condition of the patient in relation to the students' knowledge
- is physically present during the conduct of the procedure and
- reviews and approves the procedure and/or image.

Indirect Supervision- the registered radiologic technologist is immediately available to the student if they need assistance regardless of the student achievement.

Students may request competency examinations, or the clinical preceptor may direct students to perform a competency according to the following procedure:

1. a request for competency evaluation or check-off is initiated.
2. clinical educator verifies all prerequisites have been met.

The evaluator will complete the appropriate clinical competency evaluation form based on students' performance of the exam. The grade is calculated and evaluated with the student after the exam.

Students must receive a minimum grade of 80% to pass the competency. A student who receives less than 80% will have an opportunity to repeat the competency ONCE during that grading period. The repeat exam grade will be averaged in with the other competency exam for the final competency grade.

Students who do not successfully complete the required competencies for each grading period will lose points toward final clinic grade.

Repeat images must be completed under direct supervision.

Clinical Grading Scale

The scale for conversion of **Clinical Competency** percentage is as follows:

- 100-96% = A
- 95-90% = B
- 89-84% = C
- 83-80% = D
- 79-0% = F

The scale for conversion of **Professional Development** score is as follows:

- Grade A = 96-100
- Grade B = 90-95
- Grade C = 84-89
- Grade D = 80-83
- 79% or below is failing for clinical grades

*Any area of clinical grading is subject to change

The Clinical Coordinator and Course Instructor have final say on clinical competency grades. Grades are subject to change at any time. Grades are not finalized until they are validated in trajecsys by either the Clinical Coordinator or Course Instructor. Once validated, grades will be put into D2L.

Semester Clinical Requirements

Competency exams are divided by semester according to the level of difficulty, with only semester 1 and 6 having specific requirements. Students must complete the specified number of requirements per semester to receive a Final Grade (See Competency Requirements per Semester)

SUMMER SEMESTER I

- | | |
|---------------|--------------------------------|
| 1. Male CXR | 4. Upper Extremity |
| 2. Female CXR | 5. 3 Room Competencies, 3 PD's |
| 3. KUB | 6. Site Orientation Form |

FALL SEMESTER 1

- 1. 12 (minimum) CC's
- 2. 3 Re-comps- CXR, KUB, Upper Limb
- 3. 4 PD's

SPRING SEMESTER I

- 1. 15 (minimum) CC's

2. 5 Re-Comps- Pelvis, Wrist, Ankle, Elbow, and Knee
3. 3 room Competencies
4. Site Orientation Form
5. 4 PD's

SUMMER SEMESTER II

1. 15 (minimum) Competencies
2. 4 Re-Comps
3. 4 PD

FALL SEMESTER II

1. 15 (minimum) Competencies/Terminal Comp Exam
2. 1 CT checklist
3. 5 Re-comps
4. 5 PD
5. 3 room Competencies
6. Site Orientation Form

SPRING SEMESTER II

1. 15 Re-Comps/ 1 CT checklist/ Terminal Comp Exam
2. 5 PD
3. Any remaining requirements for ARRT

* Head Work- may include: facial bones, skull, mandible series, orbits, zygomatic arches, nasal bones
- all to include 3 view minimum series

**Cannot be: Panorex,(but can be used as an elective for a program requirement), 1 view sinuses

There are a specific number of competencies assigned each semester.

Each time a student changes sites the following Miscellaneous CC's must be completed within 1st 2 weeks of semester- Stretcher, Wheelchair, O2 equipment, suction equipment and MRI Safety checklist

A Terminal Competency examination will be required in the 5th and 6th semester. Its intent is to evaluate the students' ability to integrate previously learned clinical skills. Students must receive a C or better to pass. A student who receives a D or F must repeat and earn a C to pass the course.

Beginning in semester II, re-comps will be due each semester. The "re-comp" exam will be specifically assigned by the CC or can be requested at any time by the clinical preceptor at students' assigned site. The "re-comp" grade will be part of the semester final grade.

| Summer I 2023 | Fall I 2023 | Spring I 2024 | Summer II 2024 | Fall II 2024 | Spring II 2025 |
|---|---|---|---|--|--|
| Required CC's Routine CXR <ul style="list-style-type: none"> • male • female • KUB • Upper Ext | Suggested CC's <ul style="list-style-type: none"> • Upper Ext • Lower Ext • shoulder • pelvis • hip • C-Spine • T-Spine • L-Spine • Abd. Series | Suggested CC's <ul style="list-style-type: none"> • IVU or UGI -not previously comped on • Hip AP and frog OR AP and XTL • Mobile chest • Cervical spine • Lumbar spine • Shoulder W/ axillary view OR Y-view (trauma) | Suggested CC's <ul style="list-style-type: none"> • Thoracic Spine • Ribs • Sinuses • Hip - not previously comped on • Shoulder -not previously comped on | Suggested CC's <ul style="list-style-type: none"> • Barium Enema • Ped. Competency • Surgical Checklist • Special Procedures checklist • Pediatric Chest • Headwork | Suggested CC's <ul style="list-style-type: none"> • CT checklist • CT Worksheet • Trauma-adult lower Ext.- must include XTL • Terminal Competency |

The above chart in semester 2-5 are suggestions only. Semester 1 and 6 have specific requirements.

Semester 2 - 5 require specific numbers rather than exams. Students may progress more rapidly in the CC areas as their ability allows but MUST complete the minimum requirements to advance to the next semester.

All 36 exams must be completed prior to Program Directors signature for National credentialing examination.

20 of the 30 electives must also be completed prior to graduation and CANNOT be simulated.

Initial CC's should be 1st year student appropriate. 2nd and 3rd CC must be at a higher level of difficulty.

Meeting the HGTC program requirements satisfies the ARRT requirements and program requirements.

Sem 1- Thorax, Abdomen and Upper Limb covered in class.

Sem 2- Continue Upper Limb, Lower Limb, Pelvis/Hip, shoulder, Spine covered in class.

Sem 3- Bony Thorax, Fluoro Studies, IVU, all Head and facial bone studies covered in class.

Clinical Evaluation Outcomes

| |
|--|
| PREPARATION |
| Select appropriate cassettes- OR - able to correctly prepare X-ray tube and IR for body habitus |
| Prepare room and obtain necessary supplies- set up console |
| Provide clean and orderly work area |

| |
|--|
| * Evaluate the request (orders) for exam and pt information, inquires and documents relevant history |
| PATIENT CARE METHODS |
| * Verify correct patient I.D |
| * Follow Standard Precautions |
| Assist patient to and from exam room and demonstrates concern for patient comfort/modesty |
| Explain exam to patient-age appropriate |
| * Check for possible pregnancy in females age 10-60 |
| Check for and remove any non-diagnostic material from area of interest |
| Assist, monitor and communicate with patient through exam while maintaining modesty. |
| * Utilizes radiation protection for all involved persons |
| POSITIONING SKILLS - PROJECTION AP/PA |
| * Correctly position anatomic area |
| * Direct CR appropriately |
| Align tube, part and film |
| * Correctly place lead marker on film and it is visible on image |
| * Correctly collimates |
| * Select appropriate technique Mandatory- Kvp-___ MAS-___ Able to set CONSOLE - |
| POSITIONING SKILLS - PROJECTION Lateral |
| * Correctly position anatomic area |
| * Direct CR appropriately |
| Align tube, part and film |
| * Correctly place lead marker on film and it is visible on image |
| * Correctly collimates |
| * Select appropriate technique Mandatory- Kvp-___ MAS-___ Able to set CONSOLE |
| SKILLS SECTION |
| Gives proper breathing instructions for all proj's - "double inspiration" |
| Complete position within 2.5 minutes for all projections |
| Make exposures while observing patient for all projections |
| Utilize proper SID for ALL projections |
| * Identify all views correctly |
| * Able to identify all anatomy |
| Properly annotates and orients images |
| IMAGE EVALUATION - ALL PROJECTIONS |
| All images free of visible motion |
| * All anatomy included on all images |
| * Knows how to determine if patient is correctly positioned. |
| Able to determine that proper exposure factors used |

* Failure to demonstrate any starred item results in a score of 79%

Student Site Orientation

Student _____ Site _____

| | Student Initial | CP Signature | Date |
|---------------------|-----------------|--------------|------|
| Grading Explanation | | | |
| Required Paperwork | | | |

| | | | |
|--|----------------------------|--------------------------|--|
| Department Tour | | | |
| Rad. Rooms -equipment -control panel -supply area | | | |
| Dressing Area | | | |
| Reading Rooms | | | |
| Main Supply Area | | | |
| File Room | | | |
| Pt. Hold Areas | | | |
| Drug Cart/s | | | |
| O2 Locations | | | |
| Emergency Shut-offs | | | |
| Other Departments Tour: ER, OR, ICU, Admissions, Outpatient Lab, CT, MRI | | | |
| Department Protocol Handouts | | | |
| Student Parking Instructions | | | |
| Codes | Organization "Nickname" | Action Ex-How to call | |
| Cardiac and-or Respiratory Arrest | | | |
| Fire | | | |
| Severe Storm | | | |
| Bomb Threat | | | |
| Baby/Child Abduction | | | |

| | | | |
|--------|--|--|--|
| Trauma | | | |
|--------|--|--|--|

What does R.A.C.E stand for?

Name of disinfectant used to clean x-ray equipment.

What does HIPAA stand for?

Equipment Competency Form

Student _____ Date _____

Clinical Site _____ Evaluator _____

The student was able to demonstrate mastery of the following area-specific skills: (to be done for each radiographic room)

| COMPETENCY AREA | YES | NO |
|--|-----|----|
| CONTROL PANEL / CONSOLE | | |
| 1. The student was able to locate and identify the kVp selector | | |
| 2. Given a specific kVp, the student was able to correctly set the indicated value | | |
| 3. The student was able to locate and identify the mAs selector. | | |
| 4. Given a specific mAs , the student was able to accurately set the indicated value. | | |
| 5. The student was able to locate and identify the phototimer. | | |
| 6. Given a specific chamber to select, the student was able to accurately manipulate the phototimer to select the indicated cell(s). | | |
| 7. The student was able to correctly identify the rotor and exposure switch. | | |
| 8. The student was able to rotor and make an exposure. | | |
| 9. The student was able to locate and identify the overload reset. | | |
| TABLE | | |
| | YES | NO |
| 1. The student was able to identify the control for moving the table top. | | |
| 2. The student was able to correctly move the table from left-to-right. | | |
| 3. The student was able to correctly move the table top from inferior to superior. | | |
| 4. The student was able to identify the control for table angle. | | |
| 5. Given a specific degree of angle, the student was able to accurately angle the table to that given angle. | | |
| 6. The student was able to remove the foot rest. | | |
| 7. The student was able to replace the footrest, ensuring it was locked in place. | | |
| BUCKY TRAY | | |
| | YES | NO |
| 1. The student was able to open the table bucky tray. | | |
| 2. The student was able to open the upright bucky tray | | |
| 3. Given a cassette of any size, the student was able to insert and lock it into bucky. | | |
| 4. The student was able to close the bucky tray completely. | | |
| 5. The student was able to remove the cassette from the bucky tray. | | |

| COLLIMATOR | | |
|--|-----|----|
| 1. Identify collimator controls | YES | NO |
| 2. Manipulate collimator to varying cassette and/or IR sizes | | |
| DETENT | | |
| 1. Center the tube to the upright bucky – detent. 40 inches | YES | NO |
| 2. Center the tube to the upright bucky- detent – 72 inches | | |
| 3. Center the tube to the table bucky – detent- 40 inches. | | |
| 4. The student was able to determine 40 inches from tube to table-top. | | |

Comments- remarks should be written for any NO check-marks.
 Any no check-marks will result in a “re-comp” for that area/room.

Evaluator

Student Signature

Comments

Clinical Competency Evaluation
GENERAL RADIOGRAPHY

Examination _____ Clinical Site _____

| | YES | NO |
|--|------------|-----------|
| <u>PREPARATION</u> | | |
| 1. Appropriately puts IR in the bucky or on table for exam | | |
| 2. Prepare room and obtain necessary supplies- | | |
| 3. Provide clean and orderly work area | | |
| * 4. Evaluate the request (orders) for exam and patient information | | |
| <u>PATIENT CARE METHODS</u> | | |
| * 5. Verify correct patient I.D (Name, DOB, and Check wrist band) | | |
| 6. Assess patient condition | | |
| 7. Assist patient to and from exam room | | |
| 8. Explain exam to patient-age appropriate | | |
| * 9. Check for possible pregnancy in females aged 10-60 | | |
| *10. Inquire and Document relevant clinical history | | |
| 11. Does student get a proper history | | |
| 12. Check for and remove any non-diagnostic material from area of interest | | |
| *13. Follow Standard Precautions (what would you do in the clinic environment) | | |
| 14. Monitor and communicate with patient throughout exam | | |
| 15. Demonstrate consideration for patient comfort | | |
| *16. Utilizes radiation protection for all involved persons | | |

AP/PA LAT OBL OBL Other

| POSITIONING SKILLS | YES | NO | YES | NO | YES | NO | YES | NO | YES | NO |
|------------------------------|------------|-----------|------------|-----------|------------|-----------|------------|-----------|------------|-----------|
| *17. Correctly position area | | | | | | | | | | |

| | | | | | | | | | | |
|---|--|--|--|--|--|--|--|--|--|--|
| *18. Direct CR appropriately | | | | | | | | | | |
| 19. Utilize proper SID | | | | | | | | | | |
| 20. Align tube, part, and film | | | | | | | | | | |
| 21. Proper breathing instructions | | | | | | | | | | |
| *22. Correctly place marker on IR | | | | | | | | | | |
| *23. Properly collimates | | | | | | | | | | |
| 24. Select appropriate technique * - Kvp-_____ MAS- _____ | | | | | | | | | | |
| 25. Expose while observing pt | | | | | | | | | | |
| 26. Complete proj within 2.5 mins | | | | | | | | | | |

Failure to demonstrate any star item result in automatic score of 79%. Must be re-comped and both scores averaged for final grade. (((Techniques are required for all exams-even with DR and CR equipment.)))

**CLINICAL COMPETENCY EVALUATION
CONTRAST RADIOGRAPHY**

Student _____ Date _____ Grade _____

Examination _____ Site _____

| PREPARATION | YES | NO |
|---|-----|----|
| 1. Select appropriate cassettes (if applicable) | | |
| 2. Technical factors set for fluoro.- control panel- KVP- _____ MAS- _____ | | |
| 3. Spot film/digital imaging ready for exposure | | |
| 4. Prepare room and obtain necessary equipment | | |
| *5. Contrast Media ready for administration | | |
| 6. Locate emergency supplies | | |
| *7. Evaluate the request/orders for procedure and documents history | | |

| PATIENT CARE METHODS | YES | NO |
|---|-----|----|
| * 8. Verify correct ID of patient | | |
| 9. Assess patient condition | | |
| 10. Assist pt. to and from room | | |
| 11. Explain exam and risks to patient-age appropriate | | |
| * 12. Check for possible pregnancy in females age- 10-60 | | |
| * 13. Document clinical and allergy history | | |
| 14. Complete consent form as required | | |
| 15. Check for and remove any non-diagnostic material from area. | | |
| 16. Assist pt. throughout exam while maintaining modesty | | |
| * 17. Follow standard precautions | | |
| 18. Monitor and communicate with pt. throughout exam | | |
| 19. Demonstrate consideration for pt. comfort | | |
| * 20. Utilize proper radiation protection for all involved | | |

| | | |
|---|--|--|
| 21. Explain post-exam instructions to patient | | |
|---|--|--|

| POSITIONING SKILLS | YES | NO | YES | NO | YES | NO |
|---|-----|----|-----|----|-----|----|
| 22. Correctly position anatomical area | | | | | | |
| 23. Direct central ray correctly | | | | | | |
| 24. Use proper alignment, SID and collimation | | | | | | |
| 25. Gives proper breathing instructions | | | | | | |
| * 26. Correctly place lead markers on film | | | | | | |
| 27. Selects appropriate techniques | | | | | | |
| 28. Makes exposure while observing patient | | | | | | |
| 29. Completes position within 2 ½ minutes | | | | | | |

| | AP/PA | | Lat | | Obl | |
|---|-------|----|-----|----|-----|----|
| IMAGE EVALUATION | YES | NO | YES | NO | YES | NO |
| 30. Image free of visible motion | | | | | | |
| * 31. Identify views correctly | | | | | | |
| * 32. Identify eval. criteria and related anatomy | | | | | | |
| * 33. All anatomy included | | | | | | |
| 34. Technique adequate to demonstrate part | | | | | | |
| 35. Patient ID clearly visible | | | | | | |
| 36. Lead marker visible | | | | | | |

*Failure to perform the starred items results in immediate 79%

Total Possible Points

| | |
|--------------------------|-------------|
| 1 projection – 36 points | 100%-96%- A |
| 2 projections- 50 points | 95%-90%- B |
| 3 projections- 64 points | 84%-89%- C |
| 4 projections- 78 points | 83%-80%- D |
| 5 projections- 92 points | 79%-0- F |

- This form will not be accepted unless all sections are completed, including titles, signatures and comments.
- Must include techniques used

Rev 3/09 ms

**CLINICAL COMPETENCY EVALUATION
PEDIATRIC RADIOGRAPHY**

Student _____ Date _____ Grade _____

Exam _____ Pediatric- up to 6 years old Site _____

| PREPARATION | YES | NO |
|---|-----|----|
| 1. Select appropriately sized cassettes | | |
| 2. Prepare physical facilities and obtain necessary equipment | | |
| 3. Provide clean and orderly work area | | |
| *4. Evaluate request/orders for procedure and patient information | | |

| PATIENT CARE METHODS | YES | NO |
|--|-----|----|
| *5. Verify ID of child with guardian | | |
| 6. Call child by name and establish rapport | | |
| 7. Assess the child's physical condition and developmental age | | |
| 8. Assist child to and from radiographic room | | |
| 9. Explain exam to child- age appropriate | | |

| | | |
|---|--|--|
| 10. Provide explanation to child's guardian | | |
| *11. Document clinical history | | |
| 12. Check for and remove non-diagnostic material | | |
| 13. Assist child through exam while maintaining modesty | | |
| *14. Follow standard precautions | | |
| 15. Monitor and communicate with child and guardian throughout exam | | |
| 16. Demonstrate empathy for child's comfort | | |
| *17. Set correct technique MAS-_____ KvP-_____ | | |
| *18. Utilize shielding for <u>all</u> involved | | |
| 19. Ensure child safety by providing adult supervision at all times | | |
| 20. Return child to guardian | | |

| POSITIONING SKILLS | YES | NO | YES | NO | YES | NO | YES | NO |
|---|-----|----|-----|----|-----|----|-----|----|
| 21. Position area correctly | | | | | | | | |
| 22. Direct CR correctly | | | | | | | | |
| 23. Utilize proper SID | | | | | | | | |
| 24. Align tube, part and film | | | | | | | | |
| 25. Give proper breathing instructions | | | | | | | | |
| *26. Correctly place lead markers | | | | | | | | |
| 27. Properly collimate | | | | | | | | |
| 28. Make exposure while observing child | | | | | | | | |

| IMAGE EVALUATION | YES | NO | YES | NO | YES | NO | YES | NO |
|---------------------------------------|-----|----|-----|----|-----|----|-----|----|
| 29. Image free of motion | | | | | | | | |
| *30. All anatomy included | | | | | | | | |
| 31. Lead marker visible | | | | | | | | |
| *32. Identify views correctly | | | | | | | | |
| *33. Identify EC -from Merrills | | | | | | | | |
| *34. Technique adequate to demo. part | | | | | | | | |
| 35. Patient ID clearly visible | | | | | | | | |

* Failure to demonstrate starred items results in automatic 79%

Evaluator _____

Student Signature

Comments

100-96%- A

95%-90%- B

84%-89%- C

83%-80%- D

79-0= F

***This form will not be accepted unless all sections are completed, including titles, signatures and comments.**

Rev. 07-10 ms

Mobile Radiography Competency

Student _____ Date _____ Grade _____

Examination _____ Site _____

| PREPARATION | YES | NO |
|---|-----|----|
| *1. Identifies correct patient and exam according to requisition. | | |

| | | |
|--|--|--|
| 2. Locates and drives the mobile unit to the patients room | | |
| 3. Politely asks visitors to wait outside the room. | | |
| 4. Introduces self to patient and explains the procedure. | | |
| *5. Correctly ID's the patient. | | |
| 6. Obtains and documents the history prior to exam. | | |
| *7. Inquires about possible pregnancy in females. Age- 10-60 | | |
| 8. Removes all radiopaque foreign bodies. | | |
| 9. Respects patient modesty and provides comfort to the patient. | | |
| 10. Examines patient and selects appropriate equipent | | |
| 11. Adjusts the patient into the correct position for the procedure. | | |
| 12. Able to manipulate the machine with ease. | | |
| 13. Positions the machine correctly at patient bedside. | | |
| 14. Instills confidence in pt by exhibiting self-confidence throughout exam. | | |
| *15. Provides radiation protection for self and all involved. | | |
| 16 . Leaves room and patient neat and comfortable. | | |

| POSITIONING | YES | NO |
|---|-----|----|
| 1. Places the IR properly. | | |
| 2. Centers the tube to the IR correctly. | | |
| 3. Adjusts the tube to the proper SID. | | |
| *4. Correctly places lead marker on IR to not obstruct anatomy. | | |
| 5. Lead marker correctly shows on image. | | |
| 6. Correctly collimates at minimum to the IR size. | | |
| 7. Stands at least 6 feet away during exposure. | | |
| 8. Gives proper breathing instructions. | | |
| *9. Sets the proper exposure factors. kVp-_____ MAS-_____ | | |
| 10. Completes the exam within a reasonable time frame. | | |
| 11. Returns the mobile unit to the proper place and charges the unit. | | |
| 12. Correctly identifies/annotates image. | | |

| IMAGE EVALUATION | YES | NO |
|---------------------------------|-----|----|
| 1. Image free of visible motion | | |
| * 2. Identify views correctly | | |
| * 3. All anatomy included | | |

| | | |
|--|--|--|
| * 4. Know Eval Crit. and related anatomy | | |
| 5. Properly annotates and orients image | | |
| 6. Proper exposure factors used | | |
| 7. Patient ID clearly visible | | |

Total Possible Points: 35

100%-96% = A

95-90% = B

84-89% = C

83-80% = D

79-0% = F

Evaluator

Student Signature

Comments

Special Procedure CHECKLIST

Student _____ Date _____ Grade _____

Examination _____ Site _____

| GENERAL | YES | NO |
|---|-----|----|
| Evaluation of request | | |
| Set up of room. | | |
| Place/remove headboard, shoulder/knee brace as needed. | | |
| Gather appropriate supplies as needed. | | |
| ** Set a tray using sterile technique. | | |
| Prepare Contrast Media for administration. Name of contrast _____ | | |
| Identify patient and place on table. | | |
| Explain procedure. | | |
| Check chart for consent form. | | |
| Assist MD with needle puncture maintaining sterile technique. | | |
| Change films and assist patient with positioning. | | |
| Inform patient of post-procedure instructions. | | |
| Fill out necessary paperwork as per procedure protocol. | | |
| Follow Standard precautions. | | |

Evaluator _____

Student Signature _____

Comments _____

Pass _____ Fail _____

CHECKLIST FOR SURGERY / C-Arm- Orthopedic

Student _____ Date _____ Grade _____

Procedure Performed _____ Site _____

| GENERAL | YES | NO | |
|--|-----|----|--|
| Wear appropriate apparel for O.R (shoe cover, mask, scrubs, head cover) | | | |
| * Provide radiation protection for all involved in procedure. | | | |
| Verify pregnancy status in females. | | | |
| Locate sterile field in OR and demonstrate proper sterile techniques. | | | |
| Complete request with appropriate information (fluoro.time, films, etc.) | | | |
| Disinfect mobile unit regarding fluids post OR procedure. | | | |
| Demonstrate operation of C-Arm. | | | |
| Turn fluoro on/off. | | | |
| Properly set control panel for fluoro. | | | |
| Properly set control panel for spot films. | | | |
| Correctly connect TV monitor and Mobile C-Arm. | | | |
| Accurately load patient information into TV monitor. | | | |
| Store and retrieve image from disk drive. | | | |
| Place C-Arm tube in vertical position. | | | |
| Place C-Arm tube in horizontal position | | | |
| Skillful operation of all locks. | | | |
| Application of C-Arm drapes. | | | |

MUST: State average technique for common OR exams on average patient:

Briefly describe procedure performed-

Lateral C-Spine-_____

Lateral L-Spine-_____

Hip-_____

Wrist-_____

Knee-_____

CHECKLIST FOR SURGERY / C-Arm- Non-Orthopedic

Student _____ Date _____ Grade _____

Procedure Performed _____ Site _____

| GENERAL | YES | NO |
|--|-----|----|
| Wear appropriate apparel for O.R (shoe cover, mask, scrubs, head cover) | | |
| * Provide radiation protection for all involved in procedure. | | |
| Verify pregnancy status in females. | | |
| Locate sterile field in OR and demonstrate proper sterile techniques. | | |
| Complete request with appropriate information (fluoro.time, films, etc.) | | |
| Disinfect mobile unit regarding fluids post OR procedure. | | |
| Demonstrate operation of C-Arm. | | |
| Turn fluoro on/off. | | |
| Properly set control panel for fluoro. | | |
| Properly set control panel for imaging. | | |
| Correctly connect TV monitor and Mobile C-Arm. | | |
| Accurately load patient information into TV monitor. | | |
| Store and retrieve image from disk drive. | | |

| | | |
|---|--|--|
| Place C-Arm tube in vertical position. | | |
| Place C-Arm tube in horizontal position | | |
| Skillful operation of all locks. | | |
| Application of C-Arm drapes. | | |

MUST: State size of film (if applicable) and average technique for common OR exams on average patient:

Briefly describe procedure performed

CLINICAL Competency EVALUATION: Arthrogram/ Myelogram

Student _____ Date _____ Grade _____

Examination _____ Site _____

| PREPARATION | YES | NO |
|--|-----|----|
| 1. Select appropriate cassettes (if applicable) | | |
| *2. Technical factors set for fluoro.- control panel- KVP-_____ MAS-_____ | | |
| 3. Spot film/digital imaging ready for exposure | | |
| 4. Prepare room and obtain necessary equipment | | |
| *5. Contrast Media ready for administration | | |
| 6. Locate emergency supplies | | |
| *7. Evaluate the request for procedure and documents history | | |

| PATIENT CARE METHODS | YES | NO |
|---|-----|----|
| * 8. Verify correct ID of patient | | |
| 9. Assess patient condition | | |
| 10. Assist pt. to and from room | | |
| 11. Explain exam and risks to patient-age appropriate | | |
| * 12. Check for possible pregnancy in females age- 10-60 | | |
| * 13. Document clinical and allergy history | | |
| 14. Complete consent form as required | | |
| 15. Check for and remove any non-diagnostic material from area. | | |
| 16. Assist pt. throughout exam while maintaining modesty | | |
| * 17. Follow standard precautions | | |
| 18. Monitor and communicate with pt. throughout exam | | |
| 19. Demonstrate consideration for pt. comfort | | |
| * 20. Utilize proper radiation protection for all involved | | |
| 21. Explain post-exam instructions to patient | | |

| POSITIONING SKILLS | YES | NO | YES | NO | YES | NO |
|---|-----|----|-----|----|-----|----|
| 22. Correctly position anatomical area | | | | | | |
| 23. Direct central ray correctly | | | | | | |
| 24. Use proper alignment, SID and collimation | | | | | | |
| 25. Gives proper breathing instructions | | | | | | |

| | | | | | | |
|--|--|--|--|--|--|--|
| * 26. Correctly place lead markers on IR | | | | | | |
| 27. Selects appropriate techniques | | | | | | |
| 28. Makes exposure while observing patient | | | | | | |
| 29. Completes position within 2 ½ minutes | | | | | | |

| IMAGE EVALUATION | YES | NO | YES | NO | YES | NO |
|---|-----|----|-----|----|-----|----|
| 30. Image free of visible motion | | | | | | |
| * 31. Identify views correctly | | | | | | |
| * 32. Identify eval. criteria and related anatomy | | | | | | |
| * 33. All anatomy included | | | | | | |
| 34. Technique adequate to demonstrate part | | | | | | |
| 35. Patient ID clearly visible | | | | | | |
| 36. Lead marker visible | | | | | | |

*Failure to perform the starred items results in immediate 79%

Evaluator

Student Signature

Comments

Total Possible Points

100%-96% = A

95%-90% = B

84%-89% = C

83%-80% = D

79%-0 = F

- This form will not be accepted unless all sections are completed, including titles, signatures and comments.
- Must include techniques used.

Rev 7/10- ms

Special Procedure Competency

***For "Special Exams" Performed In General Rad Department- Ex. ERCP, Cysto Study, Hysterosalpingogram, Etc

Student _____ Date _____ Grade _____

Examination _____ Site _____

| GENERAL | YES | NO | N/A |
|---|-----|----|-----|
| Evaluation of request | | | |
| Set up of room. | | | |
| Gather appropriate cassettes.(if applicable) | | | |
| Place/remove headboard, shoulder/knee brace as needed. | | | |
| Gather appropriate supplies as needed. | | | |
| Set a tray using sterile technique. | | | |
| Prepare Contrast Media for administration. Name of contrast_____ | | | |
| Identify patient and place on table. | | | |
| Explain procedure. | | | |
| Check chart for consent form. | | | |
| Assist MD with needle puncture maintaining sterile technique. | | | |
| Assist patient with positioning. | | | |
| Inform patient of post-procedure instructions. | | | |
| Fill out necessary paperwork as per procedure protocol. | | | |
| Follow Standard precautions. | | | |
| Performs images as / if instructed | | | |

Pass-(all Yes/NA checks)-100% _____

Fail-(any No checks)-79% _____

Evaluator _____

Student Signature _____

Comments _____

Clinical Competency Evaluation – Sterile Tray/ Technique

Student _____ Date _____ Grade _____

Examination _____ Site _____

Final Grade- P-100% / F-0

| A.Prepare a sterile tray properly, as described below: | Yes | No |
|---|-----|----|
| 1. Wash hands thoroughly | | |
| 2. Check tray label and expiration date | | |
| 3. Place on clean cart; have extra supplies near to add to tray | | |
| 4. Open 1 st corner away from you, 2 nd side corners from center, and last toward you | | |
| 5. Do not touch the inside parts of the tray | | |

| B. Add extra supplies to the sterile tray properly, as described below: | Yes | No |
|---|-----|----|
| 1. Gather extra supplies (syringes, needles, etc) and add to the tray | | |
| 2. Grasp the outside wrapper of the sterile package and peel open; do not touch the inside of the wrapper or the item | | |
| 3. "Drop" items into the sterile tray without touching the tray or item | | |
| 4. Discard the outside wrapper | | |

| C. Add sterile solutions to the sterile tray properly, as described below: | Yes | No |
|--|-----|----|
| 1. Gather liquids (contrast, medications, etc) to add to the tray | | |

| | | |
|---|--|--|
| 2. Verify the contents of the bottle, and check expiration date | | |
| 3. Remove seal and cap from bottle correctly | | |
| 4. Pour solution slowly and in the correct position | | |
| 5. Discard remaining fluid and bottle, after procedure complete | | |

| | | |
|---|-----|----|
| D. Open and apply sterile gloves properly, as described below: | Yes | No |
| 1. Wash hands thoroughly | | |
| 2. Remove outer and inner glove wrapper | | |
| 3. Identify right and left glove | | |
| 4. With non-dominant hand, grasp inside cuff of glove and properly apply glove to hands | | |
| 5. Interlock fingers of glove to ensure proper fit | | |

| | | |
|---|-----|----|
| E. Dispose of sterile gloves properly, as described below: | Yes | No |
| 1. Grasp outside of the cuff, with the other gloved hand | | |
| 2. Pull glove off, turning inside out, discard in trash | | |
| 3. Slide fingers underneath cuff and pull off remaining glove and discard | | |
| 4. Wash hands | | |

Pass / Fail- _____

RT(R) Signature _____

Student Signature _____

CLINICAL COMPETENCY EVALUATION: Computerized Tomography

Student _____ Date _____ Grade _____

Examination _____ Site _____

| ROOM PREPARATION | N/A | YES | NO |
|---|-----|-----|----|
| 1. CT room ready prior to patient entering.(cleanliness, orderly) | | | |
| 2. Gantry and table set up correctly. | | | |
| 3. Table at correct height. | | | |
| 4. CM prepared and ready. | | | |
| 5. Console properly set up for patient and exam. | | | |
| 6. Injector armed | | | |

| PATIENT CARE | N/A | YES | NO |
|---------------------|-----|-----|----|
|---------------------|-----|-----|----|

| | | | |
|--|--|--|--|
| 1. Communicate (as needed) with patient during exam. | | | |
| 2. Patient ID'd correctly prior to exam | | | |
| 3. Patient sufficiently monitored during exam. | | | |
| 4. Compassion shown to patient throughout exam. | | | |
| 5. Explain exam to patient | | | |

| PACS | N / A | YES | NO |
|--|-------|-----|----|
| 1. Images correctly saved to PACS | | | |
| 2. Patient history entered correctly and thoroughly. | | | |
| 3. Images saved and correctly sent to PACS. | | | |

| WORK PERFORMANCE | N/A | YES | NO |
|---------------------------------------|-----|-----|----|
| 1. Correctly zeroes out machine | | | |
| 2. Patient positioned correctly | | | |
| 3. Shielding used appropriately | | | |
| 4. Correct use of workstation | | | |
| 5. Correctly manipulates gantry | | | |
| 6. Scout images manipulated correctly | | | |
| 7. Exam ended | | | |
| 8. Images sent | | | |
| 9. Patient released correctly | | | |

TERMINAL COMPETENCY Explanation

A terminal competency consists of at least 3 examinations on one patient. Two examinations **MUST** be spine work (obliques preferred) and require critical thinking skills. Special considerations may be warranted and require approval of the Clinical Coordinator.

Failure to demonstrate the following objectives, when applicable, indicates incompetence and an automatic failure will be recorded.

1. Verify correct identification of the patient.
2. Record LMP and check for pregnancy in females of childbearing age (according to department protocol).
3. Document clinical history relevant to examination.
4. Follow Standard precautions.
5. Correctly place lead identification markers on film.
6. Utilize lead shielding when appropriate.

I. **PREPARATION:** evaluation of room preparation, selection of appropriate cassettes and review of requisition for pertinent information.

3 points

___ room clean and properly prepared

___ correct size and # of cassettes selected

No Improvement Needed

___ requisition thoroughly reviewed

2 points

___ minor negligence in room preparation

___ most films selected appropriately in size and number

Improvement Needed

___ requisition not thoroughly checked

1 point

___ major negligence in room preparation

___ incorrect film sizes chosen

Marginally Acceptable

___ requisition glanced at

0 point

Unacceptable

___ gross negligence

II. **PATIENT CARE:** evaluation of assessment of patients condition, assistance and consideration during procedure, explanation of procedure and removal of possible film artifacts.

3 points

___ excellent evaluation and communication

No Improvement Needed

2 points

___ minor negligence

Improvement Needed

1 point

___ major negligence

Marginally Acceptable

0 point

___ gross negligence

Unacceptable

III. **POSITIONING AND TECHNICAL SKILLS:** evaluation of Instructions given; correct positioning, central ray direction and alignment; use of collimation; proper exposure factors set.

3 points

___ exact positioning and angulation

___ less than 1" misalignment of film, part or CR

No Improvement Needed

___ beam limited to area of interest

2 points

___ minor inaccuracy of positioning or angulation

___ more than 1- 2" misalignment of film, part or CR

Acceptable

___ inaccurate collimation

1 point

___ major error in positioning and/or angulation

___ more than 2" misalignment of film, part or CR

Marginally Acceptable

___ poor collimation

0 point

___ gross error in positioning and/or angulation

___ misalignment of film, part or CR (enough to clip anatomy)

Unacceptable

___ no collimation or over collimation to obscure area of interest

IV. **IMAGE EVALUATION-** evaluation of overall density and contrast, ability to identify proper evaluation criteria

3 points

___ evaluation criteria properly identified per view

___ good understanding of contrast and density

No Improvement

Needed

___ all areas of interest well visualized

2 points

___ minor error in identifying evaluation criteria per view

___ minor misconceptions of contrast and density

Acceptable

1 point

___ major errors in identifying evaluation criteria

___ major misconceptions of contrast and density

Marginally

Acceptable

0 points

___ no correct identification of evaluation criteria

___ no understanding of contrast and density

Unacceptable

Terminal Competency based on 6-9 projections. Grading scale:

A: 92-100

B: 84-91

C: 76-83

D: 68-82

Evaluation.

F: 0-67

*Students must receive a C or better to pass the Terminal Competency

* All TC grades will be averaged for Final Grade.

TERMINAL COMPETENCY EVALUATION

Student _____ Date _____ Grade _____

Examination _____ Site _____

I. **Preparation**- 0-3 points total for entire study _____total points

II. **Patient Care**- 0-3 points total for entire study _____total points

III. **Positioning and Technical Skills** _____total points

EXAMS 1. _____ 2. _____ 3. _____

Proj.1 _____pts. Proj.1 _____pts. Proj. 1 _____pts.

Proj.2 _____pts. Proj.2 _____pts. Proj. 2 _____pts.

Proj.3 _____pts. Proj.3 _____pts. Proj. 3 _____pts.

IV. **Image Evaluation** _____total points

Proj.1 _____pts Proj.1. _____pts Proj. 1. _____pts.

Proj.2 _____pts. Proj.2. _____pts. Proj. 2. _____pts.

Proj.3 _____pts. Proj.3. _____pts. Proj. 3. _____pts.

TOTAL POINTS/PERCENTAGE/GRADE: Add total from I., II., III., and IV. then divide by total possible points for final grade.

| <u>60 points</u> | <u>54 points</u> | <u>48 points</u> | <u>42 points</u> |
|------------------|------------------|------------------|------------------|
| 59-98% | 53-98% | 47-98% | 41-97% |
| 58-97% | 52-96% | 46-96% | 40-95% |
| 57-95% | 51-94% | 45-94% | 39-93% |
| 56-93% | 50-93% | 44-92% | 38-90% |
| 55-92% | 49-91% | 43-90% | 37-88% |
| 54-90% | 48-89% | 42-88% | 36-86% |
| 53-88% | 47-87% | 41-85% | 35-83% |
| 52-86% | 46-85% | 40-83% | |
| 51-85% | 45-83% | | |
| 50-83% | | | |

Professional Development

Professional Evaluations will be a portion of the semester final grade for ALL clinical rotations.

PD's are due on specific dates.

If a PD is submitted late, and is un-excused, the grade will be counted as a 0.

Weekly progress sheets must be submitted to assigned technologist at beginning of each week.

Students may view progress sheets at conclusion of semester, if requested.

1st through 6th semester **Professional Evaluation** outcomes

| |
|---|
| 1. Preparation for Exam / Procedure |
| a. Room correctly prepared for procedure / exam |
| b. MD orders and department request verified; patient history researched and properly recorded; Pregnancy status verified |
| 2. Communication- Verbal |
| a. Speaks clearly, appropriately and with sufficient volume |
| b. Properly addresses patients, ie. NO "pet names" |
| 3. Communication - Non-Verbal |
| a. Demonstrates positive non-verbal communication |
| b. Hides personal feelings and frustrations from patient, CI, RT, MD, etc. |
| 4. Relationship with Patient |
| a. Responsive to physical and emotional needs of patient |
| b. Courteous to all patients, regardless of race, culture or creed |
| c. Establishes good rapport with patient throughout procedure |
| d. Maintains patient dignity |
| e. Maintains patient modesty throughout procedure and in hallways, and patient rooms |
| 5. Safety |
| a. Safe and efficient use of all equipment |
| b. Does not leave patient unattended |
| c. Maintains correct guard rail and lock position on stretchers, wheelchair locks, foot stools, etc. |
| d. Effective patient transfer technique |
| e. Proper handling of IV equipment, all lines, and Oxygen- per site protocol |

| |
|--|
| 6. Confidentiality |
| a. Maintains all HIPAA guidelines set forth at site |
| b. Properly identifies patient using correct Patient Identifiers |
| |
| 7. Infection Control |
| a. Follows appropriate Standard Precaution guidelines |
| b. Properly cleans room and equipment before and after exams |
| 8. Radiation Protection |
| a. Utilizes radiation protection effectively for the patient, every time. This includes lead shielding, collimation and repeats. |
| b. Utilizes radiation protection for self and others involved in the study, every time. |
| 9. Accountability |
| a. Dressed according to HGTC dress code and prepared with required supplies, Ex. ID, dosimeter, lead markers, etc. |
| b. On-time and in assigned area at designated start time. Stays with assigned tech. |
| 10. Initiative |
| a. Displays enthusiasm about Medical Imaging |
| b. Willingness to participate / volunteer at all times |
| c. Seeks information about new/ unknown topics |
| d. Shows interest in performing assigned tasks and clinical education |
| e. Uses down-time wisely |
| 11. Team Participation |
| a. Works well with others and helps out when able, Ex. stock, clean, preparation, transport, etc. |
| b. Uses tact, courtesy and cooperation with the Healthcare team |
| 12. Integrity |
| a. Takes responsibility for own work, actions, mistakes and behavior; Performs tasks assigned to them |
| b. Refrains from negative talk about any hospital site, and / or any college policy, any personnel and procedure. Refrains from personal conversation at inappropriate times or location. |

| |
|---|
| 13. Attitude |
| a. Recognizes supervisory role of CI, site RT's, MD's and administrators. Accepts advice and / or criticism respectfully. |
| b. Maintains composure in all situations |
| 14. Communication with Healthcare Team |
| a. Demonstrates ability to communicate and interact with Healthcare team (CI, MD, RT, RN, etc) in a respectful manner |
| b. Does not let personal feelings interfere with positive daily interaction with the Healthcare team |
| 15. Equipment Use |
| a. Control panel usage is suitable for level (Sr, Jr) |
| b. Junior- Knows KVP range and sensor cells for learned procedures. Knows approximate MAS for procedures. |
| b. Senior- Can identify approximate MAS based on body habitus and pathology, and is able to completely set-up control panel for procedures- focal spot size, sensor cells, KVP and approximate MAS for procedures. |
| 16. Performance of Exams / Procedures |
| a. Able to efficiently perform exams Ex. positioning, equipment use, and post-imaging procedure |
| b. Works independently with minimal repeat exposures |
| c. Able to modify routine projections, based on level (Junior/ Senior) |
| 17. Images Correctly Marked |
| a. Lead markers used correctly |
| b. Lead markers show on images |
| 18. Knowledge of Daily Operations |
| a. Knows the protocol / operation of imaging- obtains request, locates and returns patient to correct location |
| b. Properly answers the department phone- IF applicable - and directs calls appropriately |
| 19. Utilization of Suggestions |
| a. Applies advice and suggestions from RT's |
| b. Able to continuously improve upon learned procedures based on RT suggestions |
| 20. Progress |
| a. Student is ready, willing and able to perform |
| b. Completes each projection / image in a timely manner |

Professional Development Progress Sheets

In addition to the required PD evaluation Sheets, weekly progress sheets must be completed by the staff technologists and/or clinical preceptors at the sites. These will help with constructive input from all rotations throughout the department.

These progress reports are required weekly by every student and CP's will instruct the student on which technologist should be completing them. Once completed, the information will go directly to the CP and will be used in tallying the PD Evaluation sheet, which is part of the student's final grade.

These evaluations are helpful to the students in addressing a weakness or strengths. The student does not have weekly access to the results but may, upon request meet with the CC and review them, or request to view them at the end of the grading semester.

- Please be aware that the progress sheets are for weekly assessment and the PD Evaluations are the forms that are used for the final grade. You will receive a schedule of due dates for your PD Evaluations.

It is your responsibility to carry your Clinical Handbook to your clinical rotations and have copies of all required updated Paperwork.

- Please, Also be aware that changes can be made to any/all paperwork at any time. In this event the students will be informed, as will the staff at your clinical sites.

Venipuncture Policy

1. The college lecture portion of venipuncture is taught in Positioning II, however, affiliates may require additional in-house training before the student is allowed to attempt the procedure on patients.

2. When a student is performing venipuncture, a qualified staff member must be present in the room for the entire procedure, from the needle stick through the complete injection of contrast medium. Qualified staff may include physicians, nurses, or radiographers who have been certified competent in venipuncture through regular hospital procedures.

3. At no time is a student to be left alone in a radiographic room during venipuncture or the injection of contrast medium. This rule applies even after the student has obtained competence.

4. A student is normally permitted only one stick per patient. At the hospital's discretion, a supervising staff member may authorize an additional attempt by the student. Under no circumstances is a student permitted a third attempt at a needle stick.

5. The Venipuncture Competency Form is the form that will be used to verify competency. The form must be signed by the Clinical Instructor and kept on file with the Clinical Coordinator.

6. The hospital may add additional venipuncture policies or requirements, as deemed necessary and students are required to abide by all policies.

VENIPUNCTURE COMPETENCY

Student _____ Date _____ Grade _____

Examination _____ Site _____

Evaluator: Each student must successfully perform venipuncture on THREE (3) separate patients before attempting this competency.

Reminder: Students are never to inject contrast without a technologist present in the room.

Practice #1 _____ #2 _____ #3 _____

Competency PASS _____ REPEAT _____

| SKILL | S | U |
|--|---|---|
| Identify location of crash cart | | |
| Assemble all necessary materials prior to beginning venipuncture | | |
| Identify patient | | |
| Explain procedure to the patient | | |
| Obtain allergy history and consent form | | |
| Select proper contrast material | | |
| Select proper needle/infusion set | | |
| Wash hands | | |
| Apply gloves | | |
| Skin prep with alcohol, circular motion | | |
| Apply tourniquet for venipuncture | | |
| Select optimum vessel | | |
| Insert butterfly at 10-15 degree angle, bevel up | | |
| Obtain flashback of blood into tubing/syringe | | |
| Secure needle with tape | | |
| Release tourniquet | | |
| Inject contrast | | |
| Observe for extravasation | | |
| Observe for adverse effects | | |
| Remove needle and apply pressure to site | | |
| Dispose of infusion set properly | | |
| Apply pressure dressing to venipuncture site | | |
| Remove gloves and wash hands | | |

Clinical Progression Policy

Students must be able to progress in clinical rotation by completing the expected requirements. Students who have not completed the minimum requirements for the semester will be graded accordingly. For example a student needing five Competencies and five Professional Developments, and has only completed three Competencies, will receive zeros for the two not completed and the grades will be averaged. If the student has not completed enough Competencies to attain a grade of "C" or above, they will fail the clinical requirement of the program.

If the student has not completed all required competencies, but has high enough grades from the other competencies to pass, the student will be given that grade, but will also be placed on Clinical Probation and will receive a written warning stating that all of the previous missed competencies must be completed by the following semester. Students may choose to attend clinic over breaks, during daytime hours to catch up with clinical work.

Students may not receive more than one Clinical Probation letter. A second Clinical Probation will result in dismissal from the program.

Students who have not completed the required work during their last semester, will follow the same policy. If the student's averaged grade is a "C" or above they must complete all unfinished competencies within two weeks of graduation. If the student does not finish the required work within two weeks, they will "fail" the last clinical semester.

Aug 09

ARRT Requirements

ARRT Requirements 2022

Student-

| Imaging Procedures | M/E | Date | Date |
|------------------------------------|-----|------|------|
| <i>Chest and Thorax</i> | | | |
| Chest Routine | M | | |
| Chest AP (wheelchair or Stretcher) | M | | |
| Ribs | M | | |
| Chest Lateral Decubitus | E | | |
| Upper Airway (soft-tissue neck) | E | | |
| Sternoclavicular joints | E | | |
| <i>Upper Extremity</i> | | | |
| Thumb or Finger | M | | |
| Hand | M | | |
| Wrist | M | | |
| Forearm | M | | |
| Elbow | M | | |
| Humerus | M | | |
| Shoulder (axillary) | M | | |
| Clavicle | M | | |
| Scapula | E | | |

| | | | |
|---|---|--|--|
| AC Joints | E | | |
| Trauma: Shoulder or Humerus (Scapular Y, Transthoracic or Axial) | M | | |
| Trauma: Upper extremity (non-shoulder) | M | | |
| <i>Lower Extremity</i> | | | |
| Toes | E | | |
| Foot | M | | |
| Ankle | M | | |
| Knee | M | | |
| Tibia-Fibula | M | | |
| Femur | M | | |
| Patella | E | | |
| Calcaneus | E | | |
| Trauma: Lower extremity | M | | |
| <i>Head</i> | | | |
| Skull | E | | |
| Facial Bones | E | | |
| Mandible | E | | |
| TMJ | E | | |
| Nasal Bones | E | | |
| Orbits | E | | |
| Sinus | E | | |
| <i>Spine and Pelvis</i> | | | |
| Cervical Spine | M | | |
| Thoracic Spine | M | | |
| Lumbar Spine | M | | |
| Cross-Table (horizontal beam) Lateral Spine (patient recumbent) | M | | |
| Pelvis | M | | |

| | | | |
|--------------------------------------|---|--|--|
| Hip | M | | |
| Cross Table Hip | M | | |
| Sacrum and/or Coccyx | E | | |
| Scoliosis Series | E | | |
| Sacroiliac Joints | E | | |
| <i>Abdomen</i> | | | |
| Abdomen Supine | M | | |
| Abdomen Upright | M | | |
| Abdomen Decubitus | E | | |
| IVU | E | | |
| <i>Fluoroscopy Studies</i> | | | |
| UGI single or double contrast | E | | |
| BE single or double contrast | E | | |
| SBS | E | | |
| Esophagus | E | | |
| Cystography/Cystourethrography | E | | |
| ERCP | E | | |
| Myelography | E | | |
| Arthrography | E | | |
| Hysterosalpingography | E | | |
| <i>Mobile Radiographic Studies</i> | | | |
| C-Arm Procedure (more than one view) | M | | |
| Surgical C-arm Procedure | M | | |
| <i>Mobile Radiographic Studies</i> | | | |
| Chest | M | | |
| Abdomen | M | | |
| Upper or Lower Extremity | M | | |
| <i>Pediatric Patient (up to 6)</i> | | | |
| Chest Routine | M | | |
| Upper or Lower Extremity | E | | |

| | | | |
|--------------------------------------|---|----------------|--------------|
| Abdomen | E | | |
| Mobile Study | E | | |
| <i>Geriatric Patient (65 and up)</i> | | | |
| Chest Routine | M | | |
| Upper or Lower Extremity | M | | |
| Hip or Spine | E | | |
| | | 36 Mandatories | 15 electives |
| TOTAL | | | |

CM

Rev 3/28/2023

APPENDIX

A

ARRT document- PDF format

See attached to this e-mail

Primary Certification and Registration Didactic and Clinical Competency Requirements

[RAD_CC_2022.pdf\(kc-usercontent.com\)](#)

APPENDIX

B

ARRT document- Content Specifications- Radiography Examination

[RAD_CS_2022.pdf \(kc-usercontent.com\)](#)

APPENDIX

C

HGTC STUDENT BACKGROUND CHECK, DRUG SCREENING & IMMUNIZATION/HEALTH TRACKING PACKET

Criminal Background Checks: To comply with the requirements of accrediting organizations, clinical/field placement partners, and State and Federal laws governing licensing, HGTC students are required to have acceptable criminal background checks and/or urine drug screening and/or appropriate health information/immunizations to participate in placement(s) at clinical and field facilities.

Typically, these checks and proof of health information/immunizations must be provided prior to the start of the first semester requiring clinical/field placement.

NOTE: Should your enrollment be interrupted (you miss a semester), new results for background checks, urine drug screening and/or health/immunization will be required.

All fees and costs associated with any checks, screenings or immunization are the responsibility of the student.

Admission to any of the programs listed below is conditional.

Unsatisfactory results on the criminal background check or urine drug screening, or failure to complete any required health/immunization standards WILL prevent enrollment or result in removal from enrollment in the program of study.

Criminal Background Check/Urine Drug

Screening/Immunization Tracker REQUIRED WITHIN

30 DAYS PRIOR TO START of 1st clinical/field class

