



# **RADIOLOGIC TECHNOLOGY**

## **PROGRAM HANDBOOK**

(Revised July 2015)

### **CONCORDE CAREER COLLEGE**

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This Program Handbook contains policies and procedures specific to the Radiologic Technology program and is to be used in conjunction with the current College Catalog. In case of a conflict in the information, the College Catalog has precedence.

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## LOCATION OF KEY POLICES

Attendance Policy .....	College Catalog
Conduct .....	College Catalog
Concorde Dress Code .....	College Catalog
Drug and Alcohol Abuse Policy .....	College Catalog
Family Education Rights and Privacy Act .....	College Catalog
Graduation Requirements .....	College Catalog
No Discrimination or Harassment Policy .....	College Catalog
Probation or Warning .....	College Catalog
Program Mission, Goals & Objectives .....	Currently in Addendum
Program and Course Descriptions .....	College Catalog
Satisfactory Academic Progress .....	College Catalog
Scholastic Honesty .....	College Catalog
Statement of Non-Discrimination .....	College Catalog
Students with Disabilities Policy .....	College Catalog
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## **PROGRAM EXPECTATIONS**

### **TAKE INITIATIVE**

You are expected to show enthusiasm for your learning experience. **Professional Standards at ALL times!** Professional behavior compels you to actively seek out opportunities to learn. When you do not have a specific duty or assignment, request additional tasks, find other opportunities to learn, or utilize the time to practice your skills, like positioning. Standing around, staying in the break room or control area, and talking in the hallway are unsuitable activities from a professional when you are not on break. When on break, go to designated areas so that your time is uninterrupted and to prevent any misconceptions about your performance, obligation to the site, or commitment to your learning experience.

### **CARE AND CONCERN FOR PATIENTS**

All patients are to be treated with respect, kindness and compassion. It is your responsibility as a healthcare professional to develop a positive and empathetic demeanor. Your attitude, reactions and presentation must be professional without prejudice, anger or self-righteousness. Regardless of patients' behavior, you are to maintain control of your emotions and not react to them or their conduct. Remember the "Family Rule": Treat each and every patient as if they were your family member.

### **CONSTRUCTIVE CRITICISM**

Throughout the program you will be asked to improve your skills, behavior and performance. Concorde staff and other healthcare workers want you to succeed and will provide all types of feedback in order to help you adjust and improve to the professional level you must attain in the career you have chosen. Avoid becoming defensive when criticized; do not take this personally. Use it to improve your skills or behavior and show you have the willingness and ability to change for the better.

### **PATIENT CONFIDENTIALITY**

All patient information is **strictly confidential** and protected by the law (HIPAA). Without the patient's written permission, information shall not be shared. Access only the information you need to perform your duties. Records are not to be removed from a clinical site for any reason. Do not share or discuss patient information, interactions or case information with anyone other than your supervisor or clinical instructor. Any discussion about patients, their families or their cases must be done discreetly, away from where you can be overheard. At no time is patient information to be a topic of your break time conversations.

### **ACCIDENT/INCIDENT REPORTING**

In the case of a life threatening incident/accident, immediately call 911. If you have an accident that is non-life-threatening, but requires medical treatment, have a family member drive you to a medical center for care, if you cannot drive yourself.

Contact your Academic Dean or Campus President regarding any accident or incident that occurs while attending a Concorde authorized, supervised or sponsored activity. S/he will provide all

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necessary documentation to be completed. Insurance coverage is explained in the College Catalog.

### **JRCERT STANDARDS**

A copy of the JRCERT standards is located in the Program Director's office. You may also find a copy by accessing the JRCERT website at [http://www.jrcert.org/acc\\_standards.html](http://www.jrcert.org/acc_standards.html).

The program seeks accreditation from JRCERT. Any non-compliance with JRCERT standards or policies should be immediately brought to the attention of Radiologic Technology Program Director. The college will attempt to rectify the problem within 10 business days.

Further lack of resolution for complaints regarding compliance with JRCERT standards may be addressed by contacting JRCERT at:

### **JRCERT**

20 N. Wacker Drive  
Suite 2850  
Chicago, IL 60606-3182  
Phone: (312) 704-5300  
Fax: (312) 704-5304  
E-mail: [mail@jrcert.org](mailto:mail@jrcert.org)

### **STUDENT PREGNANCY GUIDELINES**

Review the provisions set forth in the Student Pregnancy Guidelines attached in appendix A.

### **RADIATION MONITORING PRACTICES / PROTECTION**

The program requires that all students wear radiation-monitoring badges in accordance with federal radiation standards. The program director serves as the Radiation Safety Officer (RSO). He/she reviews the monitoring reports each month to assure that each student is within safe exposure guidelines according to the ALARA concept. Upon request, the radiation monitoring reports are available for student review. Reports are located in the Program Director's office. Please reference the Radiation Protection Policy attached in Appendix H.

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## **CLINICAL STANDARDS**

### **PROGRAM PERFORMANCE STANDARDS**

To provide care to patients in the clinical courses, it is recommended that students be able to perform the following:

1. Lift more than 30 pounds routinely
2. Push and pull routinely
3. Bend and stoop routinely
4. Kneel or squat routinely
5. Have full use of both hands and wrists
6. Adequately view radiographs including density, contrast, and sharpness distinctions
7. Work standing on his or her feet 80% of the time
8. Work compassionately and effectively with the sick
9. Assist patients on and off examining table
10. Communicate effectively with patients and staff
11. Organize and perform the individual steps in a radiographic examination in the proper sequence

### **PROGRAM HEALTH STANDARDS**

In addition, the student is required to document the following prior to clinical attendance:

1. Negative Tuberculin Test (PPD)
  - a. One per year in the program – must be up-to-date to enter clinical
  - b. If positive, the student must submit a negative Chest X-Ray report dated within the past year
2. Two MMR immunizations (Measles, Mumps, & Rubella) or Titer with acceptable results
3. Varicella Titer with acceptable results or present a signed waiver
4. Hepatitis B Series immunization & Titer with acceptable results or present a signed waiver
5. Tetanus, Diphtheria, and Pertussis (Tdap) Booster
6. Flu Immunization (before flu season)
7. Negative drug screening – subject to random screenings throughout program
8. Background check- A positive finding on a background check may disqualify a student for clinical participation
9. Health Screening

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## CLINICAL EXPECTATIONS

### CLINICAL COURSE DESCRIPTION (GENERAL)

Affiliation agreements with various clinical educational sites enable Concorde Career College Radiologic Technology students to gain valuable clinical experience in departments of radiology. Each student has the opportunity to demonstrate the skills learned in the classroom and laboratory in the real clinical setting. In this area each student is assigned to various department subdivisions. The student at first works closely with a registered radiologic technologist. As proficiency and speed increase, the student performs examinations in an indirectly supervised capacity. Rotations on afternoon, evening, and weekend shifts allow the students full experience access to the career.

Clinical experience involves the student in handling and care of patients and various radiographic apparatus. The student learns to manipulate exposure factors in all clinical situations under many different conditions. Each student gains significant experience in: routine and special positioning methods, surgical radiographic procedures, processing of radiographic film, CR/DR imaging, PACS, and maintaining radiographic records. Since all clinical shifts have educational value, students may be assigned to attend clinical evenings, nights, and weekends with the same expectations of student and program.

### CLINICAL ATTENDANCE

Students must maintain an acceptable record of attendance as outlined in the College Catalog. Students are permitted 16 hours of missed clinical time for **emergencies** only. Missed time will be reported in one hour increments and Clinical Coordinator may ask for documentation. If the student must leave their clinical site due to illness or other emergency, they must notify the Clinical Coordinator before they leave the site. The specific times and number of clinical days per week may vary; clinical days are 8-10 hours each day. Consult your calendars for the clinical schedules. **Clinical days and times are subject to change.**

Follow the call-in procedure (see below) in case of absence. Any clinical time missed may affect a student's program status.

Missed clinical time is reported for:

- Not attending clinical
- Arriving late to clinical 30 minutes or more will be considered a tardy
- Four tardies equals one full day of absence
- Leaving clinical before assigned dismissal time

A clinical absence results in the following:

- First 8 hours of clinical absence --verbal advising
- Second 8 hours of clinical absence -- written advising
- Next absence/tardy after 16 hours of clinical absence -- program dismissal proceedings

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## **CLINICAL ABSENCE/TARDY/EMERGENCY CALL-IN PROCEDURE**

1. Call the clinical site as early as possible (at least 1 hour prior to your start time). If you cannot reach the supervisor leave a message with someone. Be sure you write down the name of the person you spoke with and the time you spoke with him/her.
2. Call or email the Clinical Coordinator before the start of your scheduled shift. Leave a message on the voicemail system if you cannot speak with them directly.
3. If you cannot reach the clinical coordinator, notify the Program Director. Leave a message on the voicemail system if you cannot speak with them directly.
4. Failure to notify the site and/or the Program Administration before scheduled start time will result in Attendance Probation for the remaining portion of the program. A subsequent occurrence results in program dismissal. Additionally, failure to call the Program Administration when dismissed from clinical due to an emergency or illness will result in Attendance Probation for the remaining portion of the program. A second occurrence results in program dismissal.

## **CLINICAL TARDINESS**

If you know that you will arrive late please have the courtesy to call the clinical site and let them know. Abuse of this policy can result in program suspension or dismissal. Staying after shift ends to make up coming in late is not acceptable. At 31 minutes late to clinical student is tardy. Four tardies equal one full day of clinical absence.

## **CLINICAL SITE BREAKS**

Students **MUST** receive a lunch break. The clinical site will determine the time you are allowed to go to lunch. Please leave promptly when asked and arrive back on time. You may not always be able to go to lunch with your classmates. Morning/afternoon breaks or regular bathroom breaks are permitted upon receiving supervisor permission. Depending on each clinical site, smoke breaks are strongly discouraged or not permitted.

## **CLINICAL TRANSPORTATION**

A student provides his/her own transportation to and from the campus and all clinical assignments. Clinical assignments are within a **200 mile radius of the campus**. The student is responsible for parking expenses incurred while at any clinical site and is also responsible for any and all traffic/parking violation consequences.

## **STUDENT TIME SHEETS**

Students are responsible for maintaining, completing, and properly submitting their time sheet each week. Time sheets are to be emailed to the Clinical Director (CD) at the end of the last clinical day of the week (e.g. If the last clinical day is Thursday (varies per term), time sheets due to CD by end of day Thursday). Original time sheet should be given to RAD faculty twice a term: midterm and final (with the exception of term 6 students; timesheets must be emailed). Penalty for lack of submission results in a loss of clinical hours and clinical evaluations performed during the undocumented time. Failure to properly return any Time Sheet for the length of program: 1<sup>st</sup> offense-Verbal Advising and meeting with Program Director, Clinical Director, or Academic Dean, 2<sup>nd</sup> offense-Written Advising and Attendance Probation, 3<sup>rd</sup> offense-Withdrawal. Falsifying a time-sheet results in program dismissal. Fax or

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email time sheets to specified fax number/email. A copy of the Student time sheet is attached at appendix C.

### **OFF-HOUR ROTATION**

Students are often required to work hours not considered DAY-SHIFT, i.e., 3:00P to 11:30P, 11:00P to 7:30A and weekends. All shifts are educationally valid. Off-Hour Rotations not to exceed 25% of scheduled clinical hours.

### **CLINICAL DRESS CODE & CONDUCT**

You must always have your Concorde ID badge and radiation monitoring badge, and positioning lead markers while on campus or the clinical site. If you have any questions regarding the dress code, please direct them to the Program Director.

### **CLINICAL ASSIGNMENT ROTATIONS**

A plan of clinical assignments will be such that the student will be experienced in all facets of the radiology department. The student learns to apply didactic knowledge with practice in the clinical setting. Students typically rotate through radiographic rooms during day shifts. Other rotations may include afternoon & night shifts. Areas of assignments include: patient transport, reception, film library, quality control, surgery, non-surgical portables, and on a limited basis, CT, MRI, sonography, nuclear medicine, and special procedures. Students are **NOT ALLOWED** to rotate thru Mammography. The Clinical Coordinator / Clinical Instructor make assignments according to the student's educational need.

### **INJECTION OF CONTRAST MEDIA, RADIOPHARMACEUTICALS & MEDICATIONS**

Students **DO NOT, UNDER ANY CIRCUMSTANCE**, perform venipuncture, inject or otherwise "push" contrast media until deemed competent by Clinical Coordinator and Program Director. Students may introduce barium or an iodinated or non-iodinated-type of contrast media for the purpose of gastrointestinal studies.

### **CLINICAL ASSIGNMENTS AND SHARING OF PRIOR CLINICAL EVALUATIONS**

Due to patient safety concerns, before a rotation or assignment to a new, or different clinical site location, departmental officials of the accepting site are given the right to review prior clinical evaluations of students they are being asked to accept into their institution. Be advised that program administrators will be sharing prior clinical evaluations of students before new assignments or transfers take place. Your signature agreeing to abide with the policies and procedures of this handbook and the health professions program it represents provides authorization for this practice.

### **REMAINING IN CLINICAL ASSIGNMENT AREAS**

Students are to be in their assigned areas of the department of radiology. They will change assigned areas when asked to do so by their clinical instructor or supervising technologist. Changes in assignments are to be educationally valid, and approved by the clinical coordinator/clinical instructor.

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## **REPEATED RADIOGRAPHS**

A student may do the first radiograph repeat if a registered technologist is in direct supervision (see definition below). If necessary, the technologist performs the second radiograph repeat and allows the student to observe the corrections. A student never repeats a radiograph without direct supervision of a registered technologist.

## **DIRECT AND INDIRECT SUPERVISION**

Until an evaluation certifies a student competent, he/she must have direct supervision of a registered technologist when irradiating patients. This means that the technologist is present in the radiographic room with the student during the examination. After successful completion of the evaluation and the evaluation form is properly signed, the student may perform that specific examination with indirect supervision. Indirect supervision is defined as: the technologist is readily available and in hailing-distance, but not necessarily in the radiographic room at the time of the examination. The technologist has a presence near-by to observe and correct, as needed, the performance of the individual performing the examination. **Students shall never do mobile radiography solo, i.e. only with indirect supervision as stated above.**

## **HOSPITAL/CLINICAL SITE COMPUTER USE**

Under no circumstances shall a Concorde Radiologic Technology Program student use a hospital or clinical site computer for personal use. Use of these computers is strictly prohibited and confined to hospital/clinical site business. Non-business use of these computers may result in clinical dismissal of ALL hospital/clinical assigned students, therefore, any student who abuses this policy, including any use of these computers for a didactic class, shall be immediately withdrawn from his/her clinical site. Continuation in the RAD Program is contingent upon clinical site availability.

## **RECORD SECURITY AND AVAILABILITY**

Student Clinical Files: Each clinical education site is asked to provide a “lockable” file cabinet or drawer in which completed student evaluation shall be kept until received by the Concorde personnel. Should a clinical education site be unable to provide such a file device, Concorde will provide that clinical education site with a portable, lockable file box. This file box will be accessible by the clinical preceptor, the clinical instructors, and clinical coordinator.

## **CLINICAL COURSE REQUIREMENTS**

### **METHOD OF EVALUATION/ASSESSMENT**

Evaluation will be based on laboratory, clinical and radiographic room competencies, fulfillment of clinical education hours, clinical rotation evaluations, professional development evaluations, completion and maintenance of all clinical forms and documentation (Appendices F, G, H & J).

**Clinical grades will be generated from these sources: (subject to change from term to term)**

Maintenance of Log Book	15 %
Clinical Competency Evaluations	30%
Professional Development Evaluations by site/Midterm and Final	20%
Performance Evaluations by Clinical Instructor	35%

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**Students are advised as to their grade status at mid-term and term's end. If a student desires grade feedback more often the student should contact their clinical instructor as needed.**

### **STUDENT EXAM LOG**

Each student is required to keep an exam log. This log includes: the exam date, what exam was performed, if the exam was a trauma case, and if the student observed, assisted, or completed the exam (Appendix D).

### **PROCEDURE LOGS**

You are to document every radiologic procedure you perform on a clinical site. You will have many opportunities to practice procedures above and beyond those times that you will be evaluated and the logs will help you keep track of the skills you perform. Additionally, semester totals are gathered to monitor the variety of radiographs across type, trauma and body plane that you complete (Appendix E).

### **STUDENT COMPETENCY TRACKING**

In the "Clinical Competencies" section of this handbook, is a list of mandatory and elective radiographs you are to perform prior to graduation. Competency and recheck forms will be maintained by you and your Clinical Instructors to monitor your progress so that within each clinical course you complete the required number of radiographs. Also, you will track the date you are evaluated on the competency to monitor achievement of the mandatory and elective competencies as well as their respective rechecks (Appendix B). **Students are responsible for keeping copies of all clinical competencies and rechecks for their own records.**

### **PROFESSIONAL DEVELOPMENT EVALUATIONS**

The Clinical Preceptor will complete a mid-term and final evaluation on each student rotating at the facility. If an issue is noted at a clinical facility, students may be evaluated on a weekly basis by his/her Clinical Instructor or Clinical Preceptor (Appendix F).

### **PERFORMANCE EVALUATIONS BY CLINICAL INSTRUCTOR**

The Clinical Instructor will complete performance evaluations during clinical site visits. Evaluations are used to monitor student's progress throughout the clinical term (Appendix G).

### **CORRELATED CLINICAL EDUCATION**

The philosophy of education practiced within the Radiologic Technology Program is that of the experimentalist. This philosophy states that we learn best those concepts that we can experience. Therefore, throughout the curriculum of the program, clinical experience is correlated with didactic learning in an organized fashion called the **Clinical Education Plan**. Under this plan each student will accomplish approximately 1600 hours of clinical experience in the real medical world at affiliating clinical education sites of the program. Students will be involved in all phases of daily operations of a medical imaging department. Each student will be creating medical images on hundreds of patients during the extent of the program. This practice is designed to allow the full development of cognitive, affective, and psychomotor learning in the art and science of medical radiographic production.

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To become eligible for the ARRT National Examination, students **MUST** complete a specific number of Procedural FINAL Evaluations each clinical TERM.

- RAD136, Term III – 8 (maximum) Procedural FINAL Evaluations
- RAD146, Term IV – 11 (minimum) Procedural FINAL Evaluations
- RAD256, Term V – 13 (minimum) Procedural FINAL Evaluations
- RAD266, Term VI – 15 (minimum) Procedural FINAL Evaluations
- RAD276, Term VII – 23 (minimum) Procedural FINAL Evaluations
- RAD286, Term VIII - 24 (minimum) Procedural FINAL Evaluations

All 47 Procedural FINAL Evaluations and associated “Re-checks” must be completed to receive a passing grade for RAD286 in Term VIII.

**NOTE:** The clinical experience is vital to and mandatory for the total radiologic technology education. The clinical sites are at a premium and are often very difficult to obtain. It is therefore necessary that should a student be dismissed from his/her clinical site or chooses to leave his/her clinical site for any reason, he/she is entered into the program dismissal process. Program Re-Entry may be an option, but **ONLY** through the Concorde Re-Entry Process (Appendix I).

### CLINICAL EDUCATION PLAN

#### Course Identification

RAD:	No Scheduled Clinical		136	146	256	266	276	286	Totals
Term	1	2	3	4	5	6	7	8	
Credit Hours	0	0	3.5	3.5	7.0	8.5	5.0	7.0	34.5
Clock Hours	0	0	160	160	320	400	240	320	1600

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## Program Representatives

### Concorde Career College –Aurora, CO

Telephone: (303) 861-1151

Campus President	Staci Hegarty	SHegarty@concorde.edu
Program Director	Tiffany Taylor	TTaylor@concorde.edu
Clinical Coordinator	Kara Larricq	KLarricq@concorde.edu
Clinical Instructor	April Bradley	ABradley@concorde.edu
Instructor	Regan Gorjijan	RGorjijan@concorde.edu
Instructor	Alison Stohler	AStohler@concorde.edu

### Clinical Time Sheet Email: [KLarricq@Concorde.edu](mailto:KLarricq@Concorde.edu)

#### Clinical Educational Site Representatives

Affiliation	Address	City, State, ZIP	Preceptor	Phone
CO Joint Replacement	2535 S. Downing St #100	Denver, CO 80210	Tanya Mancanillas	(303) 260-2910
Denver Health (Main/Ortho)	777 Bannock St.	Denver, CO 80204	Haitham Mahmond	(303) 602-4144
Denver Health (Webb)	777 Bannock St.	Denver, CO 80204	Elliott LaBorde	(303) 602-8484
Kaiser – Parker	10168 Parkglenn Way	Parker, CO 80138	Catherine Kenney	(720) 842-5826
Kaiser – Centerpoint	14701 E Exposition	Aurora, CO 80012	Mark Sheely	(303) 614-7369
Kaiser -- East	10400 E Alameda Avenue	Denver, CO 80247	Mark Lyon	(303) 360-1325
Kaiser – Smoky Hill	16290 E Quincy Avenue	Aurora, CO 80015	Thuyen Le	(303) 699-3823
Kaiser – Southwest	5257 S. Wadsworth Blvd.	Littleton, CO 80123	Tracy Willyard	(303) 972-5306
Kaiser – Lakewood	8383 W. Alameda Ave.	Lakewood, CO 80226	Chris Bacon	(303) 239-7443
Kaiser – Lone Tree	10240 Park Meadows Dr.	Lone Tree, CO 80124	Sheila Duvall	(303) 649-5361
Platte Valley Med Ctr	1600 Prairie Center Parkway	Brighton, CO 80601	Laura Baynard	(303) 498-1776
Mt. San Rafael Hospital	410 Benedicta Ave	Trinidad, CO 81082	Jeff Kirk	(303) 845-4238
Medical Center of Aurora	1501 S. Potomac St.	Aurora, CO 80012	Melissa Estes	(303) 695 -2652
Parkview Medical Center	400 W 16th St.	Pueblo, CO 81003	Rick McManemon	(719) 584-5002

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## CLINICAL COMPETENCIES (GENERAL)

The student must:

1. Perform or assist with each radiographic procedure assigned to his/her room. Level of supervision: direct supervision of a registered radiologic technologist.
2. Perform independently with indirect supervision in areas of completed category competency evaluations.
3. Demonstrate the proper performance in the following:

### Performance Evaluation

- A. Evaluate Requisition
- B. Physical Facilities Readiness
- C. Patient Care
- D. Equipment Operation
- E. Positioning Skills
- F. Apply Principles of Radiation Protection

### Imaging Evaluation

- G. Anatomical Part(s)
- H. Proper Alignment
- I. Radiographic Technical Factors
- J. Film Identification and/or Other Identifications
- K. Radiation Protection

4. Demonstrate competence in all 32 procedures identified as mandatory (M). (**Program Graduation & Registry Eligibility Requirement**) Procedures should be performed on patients; however, up to eight mandatory procedures may be simulated (see endnote) if demonstration on patients is not feasible. Students must demonstrate competence in 15 of the 35 elective (E) procedures. **\*\*Candidates must select one elective from the cranium section and either an Upper GI or a Barium Enema plus one other elective from the fluoroscopy section.\*\*** Elective procedures should be performed on patients; however, electives may be simulated (see endnote) if demonstration on patients is not feasible. Institutional protocol will determine the positions or projections used for each procedure. Demonstration of competence includes requisition evaluation, patient assessment, room preparation, patient management, equipment operation, technique selection, positioning skills, radiation safety, image processing, and image evaluation. Rechecks for all 47 required competences need to be completed. **All procedural evaluations & Re-Check's must be completed by the 9<sup>th</sup> week of the 8<sup>th</sup> Term to graduate from the program.**

**Note:** The ARRT requirements specify that certain clinical procedures may be simulated. Simulations must meet the following criteria: (a) the student is required to competently demonstrate skills as similar as circumstances permit to the cognitive, psychomotor, and affective skills required in the clinical setting; (b) the program director is confident that the skills required to competently perform the simulated task will generalize or transfer to the clinical setting. Examples of acceptable simulation include: demonstrating CPR on a mannequin; positioning a fellow student for a projection without actually activating the x-ray beam, and evaluating an image from a teaching file; performing venipuncture by demonstrating aseptic technique on another person, but then inserting the needle into an artificial forearm or grapefruit.

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<b>Procedure</b>	<b>M or E</b>
<b>Chest and Thorax</b>	
Chest Routine	M
Chest AP (Wheelchair or Stretcher)	M
Ribs	M
Chest Lateral Decubitus	E
Sternum	E
Upper Airway (Soft-Tissue Neck)	E
<b>Upper Extremity</b>	
Thumb or Finger	M
Hand	M
Wrist	M
Forearm	M
Elbow	M
Humerus	M
Shoulder	M
Trauma: Shoulder (Scapular Y, Transthoracic or Axillary)*	M
Clavicle	E
Scapula	E
AC Joints	E
Trauma: Upper Extremity (Non-shoulder)*	M
<b>Lower Extremity</b>	
Foot	M
Ankle	M
Knee	M
Tibia-Fibula	M
Femur	M
Trauma: Lower Extremity *	M
Patella	E
Calcaneus (Os Calcis)	E
Toe	E
<b>Cranium (Must select one elective from the this section)</b>	
Skull	E
Paranasal Sinuses	E
Facial Bones	E
Orbits	E
Zygomatic Arches	E
Nasal Bones	E
Mandible (Panorex acceptable)	E
<b>Spine and Pelvis</b>	
Cervical Spine	M
Trauma: Cervical Spine (Cross Table Lateral)*	M
Thoracic Spine	M
Lumbosacral Spine	M
Pelvis	M
Hip	M
Cross Table Lateral Hip	M

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<b>Procedure</b>	<b>M or E</b>
Sacrum and/or Coccyx	E
Scoliosis Series	E
Sacroiliac Joints	E
<b>Abdomen</b>	
Abdomen Supine (KUB)	M
Abdomen Decubitus or Upright	M
Intravenous Urography	E
<b>Fluoroscopy Studies (Must select an Upper GI or a Barium Enema plus one other elective from the fluoroscopy section)</b>	
Upper GI Series (Single or Double Contrast)	E
Barium Enema (Single or Double Contrast)	E
Small Bowel Series	E
Esophagus	E
Cystography / Cystourethrography	E
ERCP	E
Myelography	E
Arthrography	E
<b>Surgical Studies</b>	
C-Arm Procedure (Orthopedic C-Arm)	M
C-Arm Procedure (Non-Orthopedic)	E
Surgical Cholangiography	E
Retrograde Pyelography	E
<b>Mobile Studies</b>	
Chest	M
Abdomen	M
Orthopedic	M
<b>Pediatrics (age 6 or younger)</b>	
Chest Routine	M
Upper Extremity	E
Lower Extremity	E
Abdomen	E
Mobile Study	E

**\* Denotes Trauma – it considered a serious injury or shock to the body. Modifications may include variations in positioning, minimal movement of the body part, etc.**

5. Demonstrate competence in all six patient care activities listed below (**General Patient Care Requirement**). The activities should be performed on patients; however, simulation is acceptable if state or institutional regulations prohibit candidates from performing the procedures on patients.
  - A. CPR
  - B. Vital signs (blood pressure, pulse, respiration, temperature)
  - C. Sterile and aseptic technique
  - D. Venipuncture
  - E. Transfer of patient
  - F. Care of patient medical equipment (e.g., oxygen tank, IV tubing)

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## **PROGRAM COMPETENCIES**

At the conclusion of the program, successful radiography students shall be able to perform the following at a competency level of 75 percent or greater clinically and 75 percent or greater didactically.

The student will:

1. Apply knowledge of anatomy, physiology, positioning, and radiographic technique selection to accurately demonstrate anatomical structures on a radiograph or other image receptor.
2. Determine exposure factors to achieve optimum radiographic technique with minimum radiation exposure to the patient.
3. Evaluate radiographic images for appropriate positioning and image quality.
4. Apply the principles of radiation protection to the patient, self, and others.
5. Provide patient care and comfort.
6. Recognize emergency patient conditions and initiate lifesaving first aid and basic life-support procedures.
7. Detect equipment malfunctions, report it to the proper authority and know the safe limits of equipment operation.
8. Exercise independent judgment and discretion in the technical performance of medical imaging procedures.
9. Provide patient / public education related to radiologic procedures and radiation protection/ safely.
10. Describe the basic components of a quality assurance program for diagnostic radiology.
11. Demonstrate knowledge and skills relating to verbal, nonverbal, and written medical communication in patient care intervention and professional relationships.

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## GRADUATE COMPETENCIES

The following are the basic graduate competencies in which each student must demonstrate proficiency upon completion of the program with an 85% or greater.

The graduate will:

1. Perform basic staff technologist responsibilities including, but not limited to: radiographic room & equipment cleaning, patient information filing, patient transportation, & other duties as directed.
2. Provide basic patient care and comfort, and anticipate patient needs.
3. Provide appropriate patient education.
4. Practice radiation protection.
5. Understand basic x-ray production and interactions.
6. Operate medical imaging equipment and accessory devices.
7. Position the patient and medical imaging system to perform examinations and procedures per ARRT requirements.
8. Exercise independent judgment and discretion in the technical performance of medical imaging procedures.
9. Demonstrate knowledge of human structure and function, and pathology.
10. Demonstrate knowledge and skills relating to quality assurance activities.
11. Evaluate the performance of medical imaging systems.
12. Evaluate medical images for technical quality.
13. Demonstrate knowledge and skills relating to medical image processing.
14. Demonstrate an understanding of the safe limits of equipment operation.
15. Recognize equipment malfunctions and report them to the proper authority.
16. Demonstrate knowledge and skills relating to verbal, nonverbal, and written medical communication in patient care intervention and professional relationships.
17. Demonstrate a support of the profession's code of ethics and comply with the profession's scope of practice.
18. Perform in a competent manner a full range of radiologic procedures, **per ARRT requirements**, on children and adults in the following categories:
  - a. Head/neck
  - b. Trauma
  - c. Musculoskeletal
  - d. Mobile
  - e. Chest/Abdomen
  - f. Surgical
  - g. Gastrointestinal
  - h. Genitourinary

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## **APPENDIX A: PREGNANCY PACKET**

This Program Handbook contains policies and procedures specific to the Radiologic Technology program and is to be used in conjunction with the current College Catalog. In case of a conflict in the information, the College Catalog has precedence.

# RADIOLOGIC TECHNOLOGY PROGRAM

## STUDENT PREGNANCY GUIDELINES

THE RADIOLOGIC TECHNOLOGY PROGRAM'S PREGNANCY POLICY HAS BEEN ESTABLISHED FOR THE PROTECTION OF THE DECLARED PREGNANT STUDENT AND THE UNBORN FETUS FROM THE HARMFUL EFFECTS OF IONIZING RADIATION. IF A STUDENT BECOMES PREGNANT DURING THE PROGRAM SHE CAN CHOOSE FROM THE FOLLOWING OPTIONS.

1. THE STUDENT MAY **VOLUNTARILY DECLARE THE PREGNANCY IN WRITING** TO THE PROGRAM DIRECTOR USING THE ATTACHED DECLARATION FORM.
2. THE DECLARED PREGNANT STUDENT HAS THE OPTION **TO WITHDRAW THE DECLARATION IN WRITING** AT ANY TIME DURING THE PREGNANCY. THIS FORM IS ALSO ATTACHED AND MUST BE GIVEN TO THE PROGRAM DIRECTOR.
3. IF NO WRITTEN DISCLOSURE IS MADE, THE STUDENT WILL CONTINUE TO BE SUBJECT TO THE SAME RADIATION DOSE LIMITS THAT APPLY TO NON-PREGNANT STUDENTS AND WILL CONTINUE HER EDUCATIONAL PROGRAM **WITHOUT MODIFICATION**.

THE NUCLEAR REGULATORY COMMISSION RULES AND REGULATIONS ARE FOR WORKING RADIOLOGIC TECHNOLOGISTS BUT THEY GIVE THE RADIOGRAPHY STUDENT THE SAME OPTIONS OF DISCLOSING OR NOT DISCLOSING A PREGNANCY WHILE ENROLLED IN A RADIOLOGIC TECHNOLOGY PROGRAM.

ONCE WRITTEN DISCLOSURE IS MADE, THE FOLLOWING STEPS WILL BE TAKEN AND OPTIONS WILL BE AVAILABLE FOR THE STUDENT.

1. ATTEND AN ADVISING SESSION WITH THE PROGRAM RADIATION SAFETY OFFICER
2. SIGN THE PREGNANCY AGREEMENT
3. AND CHOOSE ONE OF THE OPTIONS:
  - A. SHE CAN BE GIVEN A SECOND BADGE TO BE WORN AT WAIST LEVEL TO MONITOR EXPOSURE TO THE FETUS. THE STUDENT WILL ALSO FILL OUT THE ATTACHED WAIVER & WORKSHEET TO BE PLACED IN THE STUDENT FILE. THE STUDENT SHALL CONTINUE IN THE PROGRAM MAINTAINING THE ROUTINELY SCHEDULED COURSEWORK. THE STUDENT WILL ADHERE TO THE FOLLOWING RECOMMENDATION LIMITS FOR RADIATION EXPOSURE TO A PREGNANT WORKER, BASED ON THE NCRP REPORT 116, ISSUED IN 1993:  
  
ONCE PREGNANCY IS DECLARED:
    - I. **STUDENT LIMIT – 0.05 REM (0.5 mSv) PER MONTH; 0.05 REM (0.5 mSv) FOR THE ENTIRE PREGNANCY.**
  - B. ANY PREGNANT STUDENT MAY WITHDRAW FROM THE CLINICAL PORTION OF THE PROGRAM UNTIL PAST DELIVERY, WITH THE OPTION OF CONTINUING WITH DIDACTIC AND LAB WORK FOR THAT TERM.
  - C. ANY PREGNANT STUDENT MAY WITHDRAW ENTIRELY FROM THE PROGRAM FOR THE DURATION OF THE PREGNANCY. HOWEVER, IF THE STUDENT WISHES TO RETURN, SHE MAY NEED TO WAIT A YEAR TO ENTER THE CURRICULUM AT THE POINT AT WHICH SHE LEFT. TESTING MAY BE REQUIRED TO DETERMINE WHERE THE STUDENT WOULD BE PLACED INTO THE CURRICULUM UPON RETURN.

**NOTE: WITH OPTIONS B & C RE-ENTRY IS ON SPACE AVAILABILITY ONLY AND THE STUDENT MAY POSSIBLY WAIT A YEAR TO RE-ENTER.**

## RADIOLOGIC TECHNOLOGY PROGRAM

This Program Handbook contains policies and procedures specific to the Radiologic Technology program and is to be used in conjunction with the current College Catalog. In case of a conflict in the information, the College Catalog has precedence.

## STUDENT PREGNANCY AGREEMENT & WRITTEN VOLUNTARY DECLARATION OF PREGNANCY FORM

I, \_\_\_\_\_, WOULD LIKE TO DECLARE MY PREGNANCY IN WRITING.

EXPECTED GRADUATION DATE: \_\_\_\_\_

FOLLOWING THE DECLARATION OF PREGNANCY THE STUDENT WILL CHOOSE FROM ONE OF THE FOLLOWING OPTIONS:

1. ANY PREGNANT STUDENT WISHING TO CONTINUE IN THE PROGRAM WILL ATTEND AN ADVISING SESSION WITH THE RADIATION SAFETY OFFICER AND BE GIVEN A SECOND BADGE TO BE WORN AT WAIST LEVEL TO MONITOR EXPOSURE TO THE FETUS. THE STUDENT WILL ALSO FILL OUT THE ATTACHED WAIVER & WORKSHEET TO BE PLACED IN THE STUDENT FILE. THE STUDENT SHALL CONTINUE IN THE PROGRAM MAINTAINING THE ROUTINELY SCHEDULED COURSEWORK AND HER DOSE LEVEL WILL BE MONITORED ACCORDING TO RECOMMENDED LIMITS FOR RADIATION EXPOSURE DURING PREGNANCY.
2. ANY PREGNANT STUDENT MAY WITHDRAW FROM THE CLINICAL PORTION OF THE PROGRAM UNTIL PAST DELIVERY, WITH THE OPTION OF CONTINUING WITH DIDACTIC AND LAB WORK FOR THAT TERM. **NOTE: RE-ENTRY IS ON SPACE AVAILABILITY ONLY AND THE STUDENT MAY POSSIBLY WAIT A YEAR TO RE-ENTER.**
3. ANY PREGNANT STUDENT MAY WITHDRAW ENTIRELY FROM THE PROGRAM FOR THE DURATION OF THE PREGNANCY. HOWEVER, IF THE STUDENT WISHES TO RETURN, SHE MAY NEED TO WAIT A YEAR TO ENTER THE CURRICULUM AT THE POINT AT WHICH SHE LEFT. TESTING MAY BE REQUIRED TO DETERMINE WHERE THE STUDENT WOULD BE PLACED INTO THE CURRICULUM UPON RETURN. **NOTE: RE-ENTRY IS ON SPACE AVAILABILITY ONLY AND THE STUDENT MAY POSSIBLY WAIT A YEAR TO RE-ENTER.**

SELECTED OPTION OF THE RADIOGRAPHY STUDENT \_\_\_\_\_

STUDENT \_\_\_\_\_ DATE \_\_\_\_\_

CLINICAL INSTRUCTOR \_\_\_\_\_ DATE \_\_\_\_\_

PROGRAM DIRECTOR \_\_\_\_\_ DATE \_\_\_\_\_

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# RADIOLOGIC TECHNOLOGY PROGRAM

## WORKSHEET FOR PREGNANCY

STUDENT NAME \_\_\_\_\_

CLINICAL FACILITY \_\_\_\_\_

DATE \_\_\_\_\_

VERIFICATION FROM PHYSICIAN OF PREGNANCY \_\_\_\_\_

APPROXIMATE CONCEPTION DATE \_\_\_\_\_

ANTICIPATED DELIVERY DATE \_\_\_\_\_

DATE OF COUNSELING WITH RSO \_\_\_\_\_

OCCUPATIONAL DOSE OF RADIATION RECEIVED TO DATE DURING PREGNANCY \_\_\_\_\_

REMAINDER OF OCCUPATIONAL DOSE LIMIT DURING PREGNANCY \_\_\_\_\_

VERIFICATION THAT FETAL MONITOR WILL BE WORN UNDER APRON AT WAIST LEVEL \_\_\_\_\_

VERIFICATION THAT MATERNAL MONITOR WILL BE WORN AT COLLAR LEVEL \_\_\_\_\_

**STUDENT** \_\_\_\_\_ **DATE** \_\_\_\_\_

**RSO** \_\_\_\_\_ **DATE** \_\_\_\_\_

**PROGRAM DIRECTOR** \_\_\_\_\_ **DATE** \_\_\_\_\_

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# RADIOLOGIC TECHNOLOGY PROGRAM

## PREGNANCY WAIVER FORM

I, \_\_\_\_\_, UNDERSTAND THE RISKS TO THE UNBORN FETUS BY PARTICIPATING IN THE RADIOLOGIC TECHNOLOGY PROGRAM. I HAVE BEEN ADVISED BY THE RADIATION SAFETY OFFICER AND HAVE READ THE RECOMMENDED DOSE LIMITS IN THE PREGNANCY POLICY OF THE PROGRAM HANDBOOK AND STILL WISH TO CONTINUE IN THE RADIOLOGIC TECHNOLOGY PROGRAM

I AGREE TO HOLD CONCORDE CAREER COLLEGE, ITS FACULTY AND STAFF AND THE CLINICAL SITES HARMLESS FOR ANY POSSIBLE BIRTH DEFECTS OR NEGLIGENCE ON MY PART THAT MAY OCCUR DURING MY PREGNANCY.

I HAVE FILLED OUT THE WORKSHEET AND UNDERSTAND THE PREGNANCY POLICY.

STUDENT \_\_\_\_\_ DATE \_\_\_\_\_

CLINICAL INSTRUCTOR \_\_\_\_\_ DATE \_\_\_\_\_

PROGRAM DIRECTOR \_\_\_\_\_ DATE \_\_\_\_\_

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# RADIOLOGIC TECHNOLOGY PROGRAM

## WRITTEN VOLUNTARY WITHDRAWAL OF DECLARATION OF PREGNANCY FORM

I, \_\_\_\_\_, WOULD LIKE TO WITHDRAW MY DECLARATION OF PREGNANCY IN WRITING.

I UNDERSTAND THE PREGNANCY POLICY.

STUDENT \_\_\_\_\_ DATE \_\_\_\_\_

CLINICAL INSTRUCTOR \_\_\_\_\_ DATE \_\_\_\_\_

PROGRAM DIRECTOR \_\_\_\_\_ DATE \_\_\_\_\_

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## **APPENDIX B: STUDENT COMPETENCY AND RECHECK EVALUATION FORMS**

This Program Handbook contains policies and procedures specific to the Radiologic Technology program and is to be used in conjunction with the current College Catalog. In case of a conflict in the information, the College Catalog has precedence.

# Radiologic Technology Program Clinical Evaluation Form

STUDENT: \_\_\_\_\_ DATE: \_\_\_\_\_ TERM: \_\_\_\_\_

EVALUATOR: \_\_\_\_\_ EXAM: \_\_\_\_\_ ACCESSION # \_\_\_\_\_

TYPE OF EVALUATION:    COMPETENCY (   )    OBSERVATION/ATTEMPT (   )    SIMULATION (   )

This competency evaluation form has been designed for evaluating a maximum of three positions/projections per radiographic procedure (i.e., Foot: AP, oblique, lateral). The evaluator **MUST OBSERVE** the exam and will mark each area with a check (√) to indicate that point value. The student is evaluated according to how well he/she meets the objectives for each position/projection. See reverse side for examples. **PLEASE DO NOT COMPARE A STUDENT'S PERFORMANCE WITH THAT OF A TECHNOLOGIST.**

**\*A student is not permitted to get any written or oral assistance when attempting to comp/simulation\***

**Point Scale:    0 = Performance is unacceptable. Termination of this evaluation. Will not count toward competency requirements.**

1 = Performance meets some objectives. Improvement needed.

2 = Performance meets objectives, (i.e. according to student's clinical level).

(print the position/projection done)→ <b>PERFORMANCE EVALUATION: completed by staff technologist, preceptor, or Concorde CI (12 PTS.)</b>		Position/Projection			Position/Projection			Position/Projection		
		A.	B.	C.	0.	1.	2.	0.	1.	2.
A.	Evaluate Requisition									
B.	Physical Facilities Readiness									
C.	Patient Care									
D.	Equipment Operation									
E.	Position Protocol Applied									
F.	Apply Principles of Radiation Protection									
<b>Were repeats needed? (check one)    <input type="checkbox"/> NO    <input type="checkbox"/> YES – if yes, make comments below as to “Why repeated was required.”</b>										
<b>COMPLETE THIS PORTION UPON ACTUAL IMAGE EVALUATION: w/Concorde CI (10 PTS.)</b>		0.	1.	2..	0.	1.	2.	0.	1.	2.
G.	Film Quality									
H.	Positioning Skills									
I.	Technique									
J.	Use of correct markers									
K.	Anatomical Knowledge									
<b>PERCENTAGE SCORE/GRADE</b>		/22			/22			/22		

Comments: \_\_\_\_\_  
\_\_\_\_\_

**PASS:** \_\_\_\_\_ **FAIL (REASON FAILED):** \_\_\_\_\_

**Technologist Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(I have observed the student perform this exam and have evaluated him/her)

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Instructor Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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## CLINICAL EVALUATION EXAMPLES

### PERFORMANCE EVALUATION: TO BE COMPLETED BY TECHNOLOGIST OR CONCORDE CLINICAL INSTRUCTOR

#### A. Evaluate Requisition

Before performing the procedure did the student check patient's identification by:

- a) Checking the patient's name band? (in-patient)
- b) Through verbal acknowledgement? (out-patient)

Did the student check for the proper examination by:

- a) Reading the requisition
- b) Checking patient's chart
- c) Checking prescription

Did the student check for:

- a) Special orders or projections
- b) Special precautions or transportation

#### B. Physical Facilities Readiness

Did the student:

- a) Properly prepare the radiographic room for the procedure before the patient's arrival? (e.g. cassettes, table, bucky, over-head tube, etc.)
- b) Set preliminary technical factors before the patient's arrival in the room?
- c) Recognize when the used of ancillary equipment was required and prepared accordingly? (e.g. grids. Decubitus sponge, Pigg-O-Stat, etc.)

#### C. Patient Care

Did the student:

- a) Confirm the possibility of pregnancy and provide documentation?
- b) Prepare the patient properly for the radiographic procedure? (e.g. dentures, partial plates, hearing aids, any artifacts or clothing, etc.)
- c) Explain the procedure clearly to the patient?
- d) Give proper breather instructions?
- e) Give positioning assistance as needed?
- f) Speak with respect for the patient?
- g) Adapt the sequence of the procedure to meet the condition of the patient?
- h) Select exposure factors before the positioning of the patient?
- i) Have the room prepared in an orderly and timely manner?
- j) Complete the radiographic procedure in a timely manner that does not compromise the patient or the facility?

#### D. Equipment Operation

Did the student:

- a) Properly angle the central ray?
- b) Have the central ray centered to the film?
- c) Center the bucky/film to the patient
- d) Center the ancillary equipment (grid) correctly? (e.g. grid centered, not tilted/angled, etc.) Use the correct SID for the entire series?
- e) Lower the tube from detent when angling the central ray to maintain the standard distance?
- f) Select the proper kVp, mA and time (mAs) for the procedure?
- g) Properly use the AEC for the procedure?

- h) Select the proper type of cassettes(s)? (e.g. extremity)
- i) Select the proper size cassette(s)?

#### D. Equipment Operation (cont.)

Did the student properly mark . . .

- k) The film with the correct patient identification?
- l) The film for comparison studies?
- m) The film for foreign body localization?
- n) The film in a sequence during a series of radiographs?

#### E. Positioning Protocol Applied

Did the student:

- a) Place the patient in the correct position?
- b) Demonstrate knowledge of the routine positions?
- c) Have the central ray directed to the correct anatomical centering point?

#### F. Apply Principles of Radiation Protection

Did the student:

- a) Shield the gonadal area during the procedure according to protocol? (Except when the shield will cover the area of interest)
- b) Properly collimate to the part being radiographed as recommended?
- c) Demonstrate the use of technique selection as it applies to radiation protection? (e.g. low mAs, high kVp (within dx. Range))

### IMAGING EVALUATION: TO BE COMPLETED UPON ACTUAL IMAGE EVALUATION (preferably with a Concorde Clinical Instructor)

#### G. Film Quality

- a. Did the student
- b. Produce a quality film

#### H. Positioning Skills

Did the student

- a. Include all the pertinent anatomical parts?
- b. Properly position the patient for each image - angle of body planes accurate?

#### I. Technique

- a. Can the student identify or make corrections for the:
- b. Can student give an appropriate tech for the exam?

#### J. Use of correct markers

Can the student identify or make corrections for:

- a. Correct marker must be used, non digital
- b. Must be present on the final image

#### K. Anatomical Knowledge

Can the student identify all pertinent anatomy?

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# Radiologic Technology Program

## Recheck Evaluation Form

STUDENT: \_\_\_\_\_ DATE: \_\_\_\_\_ TERM \_\_\_\_\_

EVALUATOR: \_\_\_\_\_ EXAM: \_\_\_\_\_ ACCESSION # \_\_\_\_\_

TYPE OF EVALUATION: RECHECK ( ) OBSERVATION/ATTEMPT ( )

This competency evaluation form has been designed for evaluating a maximum of three positions/projections per radiographic procedure (i.e., Foot: AP, oblique, lateral). The evaluator **MUST OBSERVE** the exam and will mark each area with a check (✓) to indicate that point value. The student is evaluated according to how well he/she meets the objectives for each position/projection. See reverse side for examples. **PLEASE DO NOT COMPARE A STUDENT'S PERFORMANCE WITH THAT OF A TECHNOLOGIST.**

**\*A student is not permitted to get any written or oral assistance when attempting to comp/simulation\***

**Point Scale: 0 = Performance is unacceptable. Termination of this evaluation. Will not count toward competency requirements.**

1 = Performance meets some objectives. Improvement needed.

2 = Performance meets objectives, (i.e. according to student's clinical level).

(print the position/projection done)→ <b>PERFORMANCE EVALUATION: completed by staff technologist, preceptor, or Concorde CI (12 PTS.)</b>		Position/Projection			Position/Projection			Position/Projection		
		A.			B.			C.		
		3.	4.	5.	3.	4.	5.	3.	4.	5.
A.	Evaluate Requisition									
B.	Physical Facilities Readiness									
C.	Patient Care									
D.	Equipment Operation									
E.	Position Protocol Applied									
F.	Apply Principles of Radiation Protection									
<b>PERCENTAGE SCORE/GRADE</b>		/12			/12			/12		

Comments:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PASS:** \_\_\_\_\_ **FAIL (REASON FAILED):** \_\_\_\_\_

**Technologist Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

(I have observed the student perform this exam and have evaluated him/her)

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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## **APPENDIX C: STUDENT TIME CARD**

This Program Handbook contains policies and procedures specific to the Radiologic Technology program and is to be used in conjunction with the current College Catalog. In case of a conflict in the information, the College Catalog has precedence.

**Concorde Career College – Radiologic Technology Program Student Clinical Education Time Sheet**

Student Name: \_\_\_\_\_ Facility: \_\_\_\_\_

Week One	Date	Time In	Tech Initials	Lunch Out	Lunch In	Time Out	Daily Total	Tech Initials
Monday								
Tuesday								
Wednesday								
Thursday								
Friday								
Saturday								
Sunday								
Student Signature: _____			CI/CC Signature: _____					
Week Two	Date	Time In	Tech Initials	Lunch Out	Lunch In	Time Out	Daily Total	Tech Initials
Monday								
Tuesday								
Wednesday								
Thursday								
Friday								
Saturday								
Sunday								
Student Signature: _____			CI/CC Signature: _____					
Week Three	Date	Time In	Tech Initials	Lunch Out	Lunch In	Time Out	Daily Total	Tech Initials
Monday								
Tuesday								
Wednesday								
Thursday								
Friday								
Saturday								
Sunday								
Student Signature: _____			CI/CC Signature: _____					
Week Four	Date	Time In	Tech Initials	Lunch Out	Lunch In	Time Out	Daily Total	Tech Initials
Monday								
Tuesday								
Wednesday								
Thursday								
Friday								
Saturday								
Sunday								
Student Signature: _____			CI/CC Signature: _____					
Week Five	Date	Time In	Tech Initials	Lunch Out	Lunch In	Time Out	Daily Total	Tech Initials
Monday								
Tuesday								
Wednesday								
Thursday								
Friday								
Saturday								
Sunday								
Student Signature: _____			CI/CC Signature: _____					

**\*Students must email timesheets to Kara Larricq, DCE at the end of each week ([klarricq@concorde.edu](mailto:klarricq@concorde.edu))**

This Program Handbook contains policies and procedures specific to the Radiologic Technology program and is to be used in conjunction with the current College Catalog. In case of a conflict in the information, the College Catalog has precedence.

**Concorde Career College – Radiologic Technology Program Student Tutoring Time Sheet**

Student Name: \_\_\_\_\_

<b>Week One</b>	<b>Date</b>	<b>Time In</b>	<b>Time Out</b>	<b>Total</b>	<b>Initials</b>
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Sunday					

<b>Week Two</b>	<b>Date</b>	<b>Time In</b>	<b>Time Out</b>	<b>Daily Total</b>	<b>Initials</b>
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Sunday					

<b>Week Three</b>	<b>Date</b>	<b>Time In</b>	<b>Time Out</b>	<b>Daily Total</b>	<b>Initials</b>
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Sunday					

<b>Week Four</b>	<b>Date</b>	<b>Time In</b>	<b>Time Out</b>	<b>Daily Total</b>	<b>Initials</b>
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Sunday					

<b>Week Five</b>	<b>Date</b>	<b>Time In</b>	<b>Time Out</b>	<b>Daily Total</b>	<b>Initials</b>
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Sunday					

**\*Students must email timesheets to Kara Larricq, DCE at the end of each week (klarricq@concorde.edu)**

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## **APPENDIX D: STUDENT EXAM LOG**

This Program Handbook contains policies and procedures specific to the Radiologic Technology program and is to be used in conjunction with the current College Catalog. In case of a conflict in the information, the College Catalog has precedence.



**PROCEDURE LOG**  
**RADIOLOGIC TECHNOLOGY**

Student Name: \_\_\_\_\_

Clinical Facility: \_\_\_\_\_

DATE	EXAM PERFORMED & NUMBER	TRAUMA Y / N	OBSERVED/ASSISTED	COMPLETED

TOTALS ON THIS SHEET

Chest (non-mobile)	_____	Abdomen	_____
Upper Extremity	_____	Skull / Facial	_____
Lower Extremity	_____	Fluoro	_____
Spine	_____	Mobile	_____
Trauma	_____	Modality	_____

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## **APPENDIX E: LOG BOOK TOTALS FORM**

This Program Handbook contains policies and procedures specific to the Radiologic Technology program and is to be used in conjunction with the current College Catalog. In case of a conflict in the information, the College Catalog has precedence.

# RADIOLOGIC TECHNOLOGY PROGRAM

## Semester Log Book Totals

Term \_\_\_\_\_

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Clinical Site: \_\_\_\_\_

**Chest (non-mobile)** \_\_\_\_\_

**Upper Extremity** \_\_\_\_\_

**Skull / Facial** \_\_\_\_\_

**Lower Extremity** \_\_\_\_\_

**Fluoro** \_\_\_\_\_

**Spine** \_\_\_\_\_

**Mobile** \_\_\_\_\_

**Trauma** \_\_\_\_\_

**Modality** \_\_\_\_\_

**Abdomen** \_\_\_\_\_

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## **APPENDIX F: PERFORMANCE & PROGRESS ASSESSMENT**

This Program Handbook contains policies and procedures specific to the Radiologic Technology program and is to be used in conjunction with the current College Catalog. In case of a conflict in the information, the College Catalog has precedence.

### Radiologic Technology Program Performance & Progress Assessment

(Circle One) Mid / Final / Weekly

**INSTRUCTIONS:** Place an “X” in the category that best describes the student’s clinical performance. Clinical Director will total points assigned to each column. Please make comments to explain your reasoning. Remember, the evaluation is **ONLY to document** the student’s Performance & Progress **since the last evaluation** was completed.

CATEGORY	Indirect Supervision	Occasional Supervision	Direct Supervision	Supervising Technologist Assistance Required
<b>1. Comprehension of Exam Protocol</b>	Always understands and can describe what is needed for the exams or procedures consistent with progress in the program.	Usually understands and can describe what is needed for the exams or procedures consistent with progress in the program.	Struggles to understand and can describe what is needed for the exams or procedures consistent with progress in the program.	Seldom understands and can describe what is needed for the exams or procedures consistent with progress in the program.
<b>COMMENTS</b>				
<b>2. Quality of Images &amp; Procedures</b>	Consistently competent; High quality of performance; Always recognizes and corrects mistakes.	Usually meets the quality standards expected and usually recognizes and corrects mistakes.	Struggles to meet the quality standard expected; Has some difficulty recognizing and correcting mistakes	Seldom able to meet the quality standards expected. Makes frequent errors and rarely recognizes and/or corrects mistakes
<b>COMMENTS</b>				
<b>3. Organization of Work</b>	Is highly organized; independent, performs procedures in proper sequence; Understands and demonstrates how to set priorities and meet deadlines.	Usually does well in performing procedures in proper sequence; Seldom needs assistance in setting priorities and meeting deadlines.	Struggles to perform procedures in proper sequence; Needs assistance in setting priorities and meeting deadlines.	Has difficulty in performing work in proper sequence; Almost always needs help in setting priorities and meeting deadlines.

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<b>COMMENTS</b>				
<b>4. Initiative</b>	Superior work -- always productive; Consistently does what is expected. Uses down-time constructively.	Usually does what is expected. Usually uses down-time constructively.	Student needs to be reminded to stay on task and use down-time constructively.	Student almost always avoids work. Rarely uses down-time constructively.
<b>COMMENTS</b>				
<b>5. Patient Rapport</b>	Communicates well with patients; Anticipates patients' needs; Demonstrates great concern for patients' comfort.	Usually communicates effectively with patients; Usually demonstrates concern for patients' needs.	Struggles to communicate with patients; Has some difficulty recognizing patient needs.	Does not communicate effectively with the patient; Unable to anticipate patient needs.
<b>COMMENTS</b>				
<b>6. Critical Thinking</b>	Confident in abilities; never requires reassurance; Demonstrates great critical thinking skills; Can change the procedure while in process.	Usually demonstrates self reliance; Seldom requires reassurance; Can usually change the procedure while in process.	Struggles to demonstrate self reliance; Guidance is required to change procedure while in process.	Continuous reinforcement and guidance is required; lacks confidence; is never assigned to difficult cases.
<b>COMMENTS</b>				
<b>7. Professionalism</b>	Excellent attitude and behaviors; Has spirit of cooperation and good rapport with all staff.	Cooperative; Most often interacts well with staff and handles constructive criticism professionally.	Occasionally interacts well with staff. Has difficulty accepting constructive criticism.	Almost always has a negative attitude; Is uncooperative and quarrelsome with staff.

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COMMENTS				
<b>8. Ethics</b>	Conducts self in a professional manner at all times	Usually conducts self in a professional manner; Is able to recognize and correct unprofessional behaviors.	Struggles to conduct self in a professional manner; Guidance is required for student to recognize unprofessional behavior.	Does not follow professional standards; Unprofessional behavior consistently makes others uncomfortable; Unable to recognize or correct behavior.

COMMENTS				
<b>Sub-Total of Points in Each Column</b>	_____	_____	_____	_____
<b>Total Eval Points</b>				_____ / 80
<b>Total Percentage</b>				_____ %

SUMMARY COMMENTS (if applicable)

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\_\_\_\_\_  
 Evaluator Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Student Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Concorde Clinical Instructor Signature

\_\_\_\_\_  
 Date

*\*Student signature indicates that a discussion with the evaluator and/or clinical instructor has taken place and does not signify student agreement with the assessment*

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## **APPENDIX G: PERFORMANCE EVALUATIONS BY CLINICAL INSTRUCTOR**

This Program Handbook contains policies and procedures specific to the Radiologic Technology program and is to be used in conjunction with the current College Catalog. In case of a conflict in the information, the College Catalog has precedence.

Student Name \_\_\_\_\_ Date \_\_\_\_\_ Term \_\_\_\_\_

Clinical Assignment \_\_\_\_\_ Evaluator \_\_\_\_\_

**Radiologic Technology Program  
CI Visit Report:**

Category	A. Indirect Supervision	B. Occasional Supervision	C. Direct Supervision	D. Supervising Technologist Assistance Required	Comments
1. Comprehension of Exam Protocol	10	8	7	0	
2. Quality of Images & Procedures	10	8	7	0	
3. Organization of Work	10	8	7	0	
4. Initiative	10	8	7	0	
5. Patient Rapport	10	8	7	0	
6. Critical Thinking	10	8	7	0	
7. Professionalism	10	8	7	0	
8. Professional Ethics	10	8	7	0	
<b>Sub-TOTALS</b> Add up the marked scores and tally across					= _____ / 80 <b>FINAL Percentage</b> = _____

A ≥ 90;      B ≥ 80;      C ≥ 75;      F < Failing

*Signature below confirms that form has been reviewed by student and evaluator*

 \_\_\_\_\_  
 Evaluator Signature

 \_\_\_\_\_  
 Date

 \_\_\_\_\_  
 Student Signature

 \_\_\_\_\_  
 Date

Grading examples are located on the backside of this form.

This Program Handbook contains policies and procedures specific to the Radiologic Technology program and is to be used in conjunction with the current College Catalog. In case of a conflict in the information, the College Catalog has precedence.

### **Comprehension of Exam Protocol**

- A. Always understands and can describe what is needed for the exams or procedures consistent with progress in the program.
- B. Usually understands and can describe what is needed for the exams or procedures consistent with progress in the program.
- C. Sometimes understands and can describe what is needed for the exams or procedures consistent with progress in the program.
- D. Seldom understands and can describe what is needed for the exams or procedures consistent with progress in the program.

### **Quality of Images & Procedures**

- A. Consistently competent; High quality of performance; Always recognizes and corrects mistakes.
- B. Most often meets the quality standards expected and usually recognizes and corrects mistakes.
- C. Sometimes able to meet the quality standard expected; Has some difficulty recognizing and correcting mistakes
- D. Seldom able to meet the quality standards expected. Makes frequent errors and rarely recognizes and/or corrects mistakes

### **Organization of Work**

- A. Is highly organized; independent, performs procedures in proper sequence; Understands and demonstrates how to set priorities and meet deadlines.
- B. Usually does well in performing procedures in proper sequence; seldom needs assistance in setting priorities and meeting deadlines.
- C. Sometimes performs procedures in proper sequence; Needs assistance in setting priorities and meeting deadlines.
- D. Has difficulty in performing work in proper sequence; almost always needs help in setting priorities and meeting deadlines.

### **Initiative**

- A. Superior work -- always productive; consistently does what is expected. Uses down-time constructively.
- B. Most often does what is expected. Usually uses down-time constructively.
- C. Student needs to be reminded to stay on task and use down-time constructively.
- D. Student almost always avoids work. Rarely uses down-time constructively.

### **Patient Rapport**

- A. Communicates well with patients; Anticipates patients' needs; Demonstrates great concern for patients' comfort.
- B. Most often communicates effectively with patients; Usually demonstrates concern for patients' needs.
- C. Sometimes able to communicate with patients; Has some difficulty recognizing patient needs.
- D. Does not communicate effectively with the patient; Unable to anticipate patient needs.

### **Critical Thinking**

- A. Confident in abilities; never requires reassurance; Demonstrates great critical thinking skills; Can change the procedure while in process. Good decisions regarding stressful situations.
- B. Most often demonstrates self-reliance; Seldom requires reassurance; Can usually change the procedure while in process.
- C. Sometimes demonstrates self-reliance; Guidance is required to change procedure while in process.
- D. Continuous reinforcement and guidance is required; lacks confidence; is never assigned to difficult cases. Becomes easily frustrated in stressful situations.

### **Professionalism**

- A. Excellent attitude and behaviors; Has spirit of cooperation and good rapport with all staff.
- B. Cooperative; Most often interacts well with staff and handles constructive criticism professionally.
- C. Sometimes interacts well with staff. Has difficulty accepting constructive criticism.
- D. Almost always has a negative attitude; Is uncooperative and quarrelsome with staff.

### **Professional Ethics**

- A. Conducts self in a professional manner at all times
- B. Usually conducts self in a professional manner; Is able to recognize and correct unprofessional behaviors.
- C. Sometimes able to conduct self in a professional manner; Guidance is required for student to recognize unprofessional behavior.
- D. Does not follow professional standards; Unprofessional behavior consistently makes others uncomfortable; Unable to recognize or correct behavior.

This Program Handbook contains policies and procedures specific to the Radiologic Technology program and is to be used in conjunction with the current College Catalog. In case of a conflict in the information, the College Catalog has precedence.

## **APPENDIX H: RADIATION PROTECTION POLICIES**

This Program Handbook contains policies and procedures specific to the Radiologic Technology program and is to be used in conjunction with the current College Catalog. In case of a conflict in the information, the College Catalog has precedence.

# RADIOLOGIC TECHNOLOGY PROGRAM

## Radiation Protection

1. Before being assigned to clinical rotation, each student must pass an introductory course to radiation protection techniques and practices (Chapter Eighteen, "Introduction to Radiologic Technology" by Gurley & Callaway).
2. Each student is issued a radiation monitoring badge to be worn at the collar level while at his/her clinical site. These badges are changed each month.
3. Under normal conditions, as student's badge reading will be well below 50 mrem. Monthly statements of student radiation readings are available for students to view. Administration monitors readings and maintains a report of badge readings, which are available upon request.
4. A student who received over the 50 mrem/month is advised of this matter and the incident is discussed in more detail with the Radiation Safety Officer. A report is filed and recorded in the student's file upon completion of the discussion. The discussion, in brief, includes, but not limited to; time, distance, cause, shielding and a review of protection practices.
5. If the monitoring badge is inadvertently sent through the laundry, it is destroyed. **DO NOT THROW IT AWAY. BRING IT TO THE RADIATION SAFETY OFFICER FOR RETURN TO THE SUPPLIER. ALL BADGES MUST BE ACCOUNTED FOR.** While a reading for that month cannot be attained we still track and report badge usage.
6. Be sure to report any incident with your film badge to the Radiation Safety Officer.
7. **DO NOT WEAR THE FILM BADGE WHILE YOU ARE RECEIVING A MEDICAL OR DENTAL RADIOGRAPHY EXAMINATION. THE BADGE IS FOR OCCUPATIONAL DOSE ONLY.**
8. When using ionizing radiation, the student will use all precautions for both themselves and the patient. This involves the use of:
  - a. Time
  - b. Distance
  - c. Shielding
  - d. Use of correct film/screen combinations
  - e. Use of grids when applicable
  - f. Beam restriction
  - g. Technical factor selection (ALARA)
9. Every time a film is repeated, the patient receives another dose of radiation. Therefore, it is important to attain a film of diagnostic quality with the first exposure. **IF IT IS NECESSARY TO REPEAT A RADIOGRAPH, THE STUDENT MUST BE UNDER DIRECT SUPERVISION.** (See Indirect/Direct Supervision)
10. Holding a patient is **NEVER** a routine choice, but is sometimes a necessary, educated option. Use of alternative immobilization devices is always strongly recommended.

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# RADIOLOGIC TECHNOLOGY PROGRAM

## Radiation Monitoring Counseling Report

1. At which clinical facility or facilities were you assigned?
  
2. In what rooms or with which technologists did you work?
  
3. Do you remember any days or specific procedures which might have lead to the excessive radiation reading for the time period in question?
  
4. Specifically, what are your plans to prevent further excessive radiation reports?
  
5. Discussed Time                      Yes / No
6. Discussed Distance                Yes / No
7. Discussed Shielding                Yes / No

I have met with my clinical instructor or clinical coordinator and understand that my radiation monitoring badge report was excessive for the said time period. I received counsel with regards to what I can do to minimize this radiation absorption and agree to follow said counsel.

\_\_\_\_\_

Student's Name	Student's Signature	Date
----------------	---------------------	------

\_\_\_\_\_

Program Representative	Date
------------------------	------

Month of Report: \_\_\_\_\_ Report Reading: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
DDE                      LDE                      SDE

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## RADIOLOGIC TECHNOLOGY PROGRAM

### Radiation Monitoring Report

\_\_\_\_\_  
Student's Name

Program policy requires notification of radiation received outside Program safety levels. From the badge report for the monitoring period from \_\_\_\_\_ to \_\_\_\_\_, you received a current dose reading of \_\_\_\_\_. This is above the Program acceptance level of 50mrem. Please note this reading and see a Program official regarding this matter. Together with the Program official, you will discuss possible causes for the increased reading and possible solutions to keep the reading at minimal levels. Do not hesitate to contact me with any comments or questions.

Sincerely,

\_\_\_\_\_  
Radiologic Technology RSO

\_\_\_\_\_  
Date

This Program Handbook contains policies and procedures specific to the Radiologic Technology program and is to be used in conjunction with the current College Catalog. In case of a conflict in the information, the College Catalog has precedence.

## **APPENDIX I: CLINICAL DISMISSAL**

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# RADIOLOGIC TECHNOLOGY PROGRAM

## Clinical Dismissal Policy

I understand that clinical experience is vital to and mandatory for my radiologic technology education. I also understand that clinical sites are at a premium and are often very difficult to obtain. If I am dismissed from my clinical site for any reason, I understand that I am also dismissed from the Radiologic Technology Program and cannot complete any other didactic courses in which I am currently enrolled. I understand that Program Re-Entry may be an option, but I MUST follow the Concorde catalog policies for Re-Entry.

SAMPLE

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PRINT – Student’s Name

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Student’s Signature

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Date

This Program Handbook contains policies and procedures specific to the Radiologic Technology program and is to be used in conjunction with the current College Catalog. In case of a conflict in the information, the College Catalog has precedence.

## **APPENDIX J: ROOM ORIENTATION FORMS**

This Program Handbook contains policies and procedures specific to the Radiologic Technology program and is to be used in conjunction with the current College Catalog. In case of a conflict in the information, the College Catalog has precedence.

## Level 1 Clinical Competency Evaluation Radiographic Control Panel & Accessories

Student: \_\_\_\_\_

Date: \_\_\_\_\_ Room: \_\_\_\_\_ Evaluator: \_\_\_\_\_

OBJECTIVE: This student can . . .	✓ or n/a
▪ . . operate the on/off switch	
▪ . . .demonstrate the proper tube warm-up procedure	
▪ . . .select a specified kilovoltage setting	
▪ . . .select specified mAs setting	
▪ . . .select a time setting that will provide a specified mAs value, with a given mA station (e.g.: 200 mA, _____ sec. = 20 mAs)	
▪ . . .select a mA setting that will provide a specified mAs value, with a given time station (e.g. : _____ mA, 0.20 sec = 20 mAs)	
▪ . . .when given an mAs value, select a technique to minimize the chance of motion/unsharpness	
▪ . . .demonstrate the proper use of the rotor and exposure control switches	
▪ . . .demonstrate how one knows when the x-ray exposure is properly terminated	
▪ . . .demonstrate how to select tabletop, vertical bucky, or table bucky using correct controls	
▪ . . .place a 10" x 12" IR crosswise in the vertical bucky using: 40"SID, 20 mAs, 75 kVp and a small focal spot size	
▪ . . .identify two ways one would know an exposure was made during a procedure	
▪ . . .demonstrate proper automatic exposure control selection	
▪ . . .properly place a portable grid on a cassette	
▪ . . .properly mount the shoulder-restraining device to the radiographic table	

Comments:

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\_\_\_\_\_  
Evaluator's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

Completion of this evaluation is required for Term Completion and Program Continuance. Evaluator must return this form to the clinical instructor for recording purposes.

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## Level 1 Clinical Competency Evaluation Equipment Manipulation/Identification, R/F

Student: \_\_\_\_\_

Date: \_\_\_\_\_ Room: \_\_\_\_\_ Evaluator: \_\_\_\_\_

	OBJECTIVE: This student can . . .	✓ or n/a
▪	. . .manipulate the generator control panel for fluoroscopic readiness	
▪	. . .install and remove the table foot platform, stirrups, lead curtain, and hand supports	
▪	. . .position image intensifier, TV monitor, foot pedal, and OH tube for fluoro readiness	
▪	. . .manipulate table bucky tray for fluoroscopy	
▪	. . .properly input patient information into computer	
▪	. . .properly select technical factors for fluoroscopy	
▪	. . .manipulate vertical bucky stand	
▪	. . .identify five different radiographic protection devices	
▪	. . .operate table top longitudinal / transverse directional switches	
▪	. . .manipulate the table angle to a specified angle	
▪	. . .manipulate the longitudinal, transverse, & vertical overhead tube locks	
▪	. . .set vertical tube lock to a specified SID	
▪	. . .manipulate overhead tube swivel lock properly	
▪	. . .manipulate overhead tube to a specified angle while maintaining appropriate SID	
▪	. . .manipulate overhead tube detents for correct alignment to vertical and table bucky grids	
▪	. . .collimate the field size to specific dimensions	
▪	. . .properly prepare images for Radiologist	

Comments:

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\_\_\_\_\_  
Evaluator's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

Completion of this evaluation is required for Term Completion and Program Continuance. Evaluator must return this form to the clinical instructor for recording purposes.

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# Level 1 Clinical Competency Evaluation

## Patient Care and Safety

Student: \_\_\_\_\_

Date: \_\_\_\_\_ Room: \_\_\_\_\_ Evaluator: \_\_\_\_\_

<b>OBJECTIVE: This student can correctly demonstrate the knowledge of:</b>	✓ or n/a
Patient safety while patient is unattended	
Identifying patient data from exam request form (isolation, history, date of exam, etc.)	
Differential treatment of patient needs with respect to age, cultural differences, disabilities, etc.	
Patient confidentiality in accordance with HIPAA regulations	
To locate contrast and other ancillary equipment (i.e. barium bags, etc.)	
Properly restocking room on a daily basis	
Preparing the radiographic table to maximize patient comfort. (Blanket warmer, mat, etc.)	
The location of emergency life support equipment and supplies	
Department protocol regarding life-threatening emergencies (calling codes, etc)	
The use of departmental contrast media consent forms	
How to correctly identify in-patients and out-patients	
Isolation precautions e.g., DNR, fall precautions, altered mental status, etc.	
Proper communicate and with respectfulness with all patient types	
Where to locate patients and how to prepare them for exams	
The use of sharps container, positioning aids, foot stool, pediatric and adult immobilization devices	

Comments:

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\_\_\_\_\_  
Evaluator's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

Completion of this evaluation is required for Term Completion and Program Continuance. Evaluator must return this form to the clinical instructor for recording purposes.

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# Level 1 Clinical Competency Evaluation

## C-ARM -- Equipment Manipulation/Identification

(Used in TERM that includes mobile fluoroscopy instruction)

Student: \_\_\_\_\_

Date: \_\_\_\_\_ Room: \_\_\_\_\_ Evaluator: \_\_\_\_\_

OBJECTIVE: This student can . . .	✓ or n/a
Safely maneuver C-arm & workstation engaging/disengaging brakes	
Safely connect & disconnect all cables	
Safely turn fluoroscopic system on & off	
Position image intensifier, TV monitor, and foot pedal for fluoro readiness	
Understand & manipulate all movements, locks, & steering handle	
Prepare patient information screen for fluoroscopy imaging	
Utilize Image Annotation Screen	
Utilize Image Directory Screen	
Properly orient image on fluoro screen	
Properly utilize technique settings, Alarm Reset, & collimation	
Properly utilize Magnification	
Properly utilize Save & Workstation (Swap)	
Properly utilize Brightness/Contrast/Auto	
Properly utilize high level fluoro	
Properly locate & understand the Status bar	

Comments:

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\_\_\_\_\_  
Evaluator's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

Completion of this evaluation is required for Term Completion and Program Continuance. Evaluator must return this form to the clinical instructor for recording purposes.

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# Level 1 Clinical Competency Evaluation

## Mobile C-Arm Procedure

(Used in TERM that includes student's use of mobile fluoroscopy)

Student: \_\_\_\_\_

Date: \_\_\_\_\_ Room: \_\_\_\_\_ Evaluator: \_\_\_\_\_

OBJECTIVE: This student can . . .	✓ or n/a
Properly maneuver the C-arm and workstation	
Describe and demonstrate the use of the C-arm locks	
Explain and demonstrate the Left/Right and Superior/Inferior orientations	
Reset the fluoroscopy timer	
Save and Print images with proper contrast and density adjustments	
Properly rotate the monitor screen	
Demonstrate the proper use of continuous and intermittent fluoroscopy	
Demonstrate the proper use of auto setting and manual exposure settings	
Demonstrate the proper use of each button or switch on the workstation	
Demonstrate the proper sequence to connect and disconnect the unit	
Properly identify anatomy found in the exams performed	
Properly manipulate the C-arm for the exams performed	
Identify technical difficulties / give proper improvement instructions while performing the exams	
Use appropriate patient and personnel radiation protection during exams	
Properly store the C-arm and monitor	

Comments:

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\_\_\_\_\_  
Evaluator's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

Completion of this evaluation is required for Term Completion and Program Continuance. Evaluator must return this form to the clinical instructor for recording purposes.

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Exam Type	Mand.	Elect.	Re-check	Sim
Abdomen (age 6 or younger)				
Abdomen Decubitus				
Abdomen Upright				
Abdomen Supine (KUB)				
AC Joints				
Ankle				
Arthrography				
Barium Enema (Single or Double) Contrast*				
Calcaneus (Os Calcis)				
C-Arm Procedure - Orthopedic				
C-Arm Procedure - Non-Orthopedic				
Cervical Spine				
Chest AP, Wheelchair or Stretcher				
Chest Lateral Decubitus				
Chest Routine				
Chest, (age 6 years or younger)				
Clavicle				
Cystography or Cystourethrogram				
Elbow				
ERCP				
Esophagus study*				
Facial Bones*				
Femur				
Finger or Thumb				
Foot				
Forearm				
Hand				
Hip				
Hip, cross table lateral				
Humerus				
Intravenous Urography				
Knee				
Lower Extremity (age 6 or younger)				
Lumbar Spine				
Mandible (Panorex Acceptable)*				
Mobile Study (age 6 or younger)				
Myelography				
Nasal Bones*				
Orbits*				
Paranasal Sinuses*				
Patella				
Pelvis				
Portable Abdomen				
Portable Chest				
Portable Orthopedic				
Ribs				
Sacroiliac Joints				
Sacrum and/or coccyx				
Scapula				
Scoliosis Series				
Shoulder				
Skull*				
Small Bowel series				
Sternum				
Thoracic Spine				
Tibia-Fibula				
Toe				
Trauma Cervical Spine (Cross Table Lateral)				
Trauma: Lower Extremity				
Trauma: Shoulder (Scapular Y, Transthoracic, Axillary)				

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Trauma: Upper Extremity (Nonshoulder)				
Upper Airway (Soft Tissue Neck)				
Upper Extremity (age 6 or younger)				
Upper G.I. Series (Single or Double) Contrast*				
Wrist				
Zygomatic Arches*				

\*Must select UGI or BE plus one other elective from the fluoroscopy section\*

\*\*Must select one elective exam from the cranium\*\*

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## ACKNOWLEDGMENTS

### COMPETENCIES

I, \_\_\_\_\_, (Print Name) understand the number of competencies and rechecks that I must complete in each term and in total. I understand that should I not complete the stated amount each term it will adversely affect my clinical grade and/or result in program dismissal. Also, failing to complete ALL competencies and rechecks by the end of Term 8 makes me ineligible to complete the program.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### GRADING

I, \_\_\_\_\_, (Print Name) understand the Method of Evaluation for Clinical and agree to abide by these policies and procedures.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### ATTENDANCE

I, \_\_\_\_\_, (Print Name) understand the RAD Program Attendance Policy for Classwork and Clinical and agree to abide by these policies and procedures.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### CLINICAL DISMISSAL POLICY

I, \_\_\_\_\_, (Print Name) understand that clinical experience is vital to and mandatory for my radiologic technology education. I also understand that clinical sites are at a premium and are often very difficult to obtain. If I am dismissed from, or refuse my clinical site for any reason, I understand that I am also dismissed from the Radiologic Technology Program and cannot complete any other didactic courses in which I am currently enrolled. I understand that Program Re-Entry may be an option, if and when space is available, but I MUST follow the Concorde policies for Re-Entry.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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