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RADIOLOGIC TECHNOLOGY

PROGRAM HANDBOOK

(Revised July 2017)

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.

TABLE OF CONTENTS

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 and/or Addendum
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	College Catalog
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
Student Complaint and Grievance Procedure	College Catalog
Termination Policy	College Catalog
Tardy Policy	College Catalog
Syllabi	Start of each course
Textbooks	Course Syllabi & Receipt

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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

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

call 3rd (256) 338-5243

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.

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

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.

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 before they are placed on attendance probation. 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 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
- Leaving clinical before assigned dismissal time

A clinical absence results in the following:

- First clinical absence –verbal alert / warning
- Second clinical absence – verbal advising
- Third clinical absence – immediate attendance probation and written advising
- Next absence/tardy after third 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 your clinical instructor or the clinical coordinator, call the Program Director and 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 could 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.

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 150 miles 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 and turning in their time sheet each week. The time sheet must be signed at the beginning of and end of every clinical day by the supervising technologist and at the end of each week by the clinical supervisor at the clinical site. Penalty for lack of signature results in a tardy, loss of clinical hours, and clinical evaluations performed during the undocumented time. Time sheets are to be faxed or emailed to the Clinical Coordinator at the end of the last clinical day of the week (e.g. Thursday is last clinical day of week, time sheets due to CC by end of day Thursday). Original time sheet should be given to RAD faculty twice a term: midterm and final. Failure to fax in your time sheet on time may result in disciplinary action. Fax time sheets to specified fax number. Falsifying a time-sheet

results in program dismissal. Failure to properly return Time Sheet (per 10-Week Term): 1st offense-Advising, 2nd offense-Attendance Probation, 3rd offense-Meeting with Academic Dean. 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: darkroom, 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.

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: All student files are kept in a lockable file cabinet in the clinical coordinator's office on Concorde's campus. They are available for review upon request.

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 B, F, G, & J).

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

Maintenance of Log Book	10 %
On-site Clinical Competency Evaluations	30%
Professional Development Evaluations by site / Mid and Final	25%
Performance Evaluations by Clinical Coordinator	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.

CLINICAL EVALUATIONS

The Clinical Instructor 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 can be evaluated on a weekly basis by his/her Clinical instructor or Clinical Coordinator.

STUDENT COMPETENCY TRACKING

In the Required Competencies section of this handbook, is a list of mandatory and elective radiographs you are to perform prior to graduation. As the program is designed to help you build your skills from beginning level to higher levels of complexity, these competencies and respective quantities have been divided by course. Competency sheets will be maintained by you and your clinical instructors to monitor your progress so that within each clinical course you complete a minimum number of radiographs to attain the required quantities. Also, you will track the date you are evaluated on the competency to monitor achievement of the mandatory competencies and the desired elective competencies (Appendix B). It is the **Students responsible for keeping copies of all clinical competencies and rechecks for their own records.**

PROFESSIONAL DEVELOPMENT EVALUATIONS

The Clinical Instructor 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 Coordinator (Appendix F or G depending on clinical term).

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 F & G).

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).

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.

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

RAD136, Term III – 3 Procedural FINAL Evaluations
RAD146, Term IV – 6 Procedural FINAL Evaluations
RAD256, Term V – 13 Procedural FINAL Evaluations
RAD266, Term VI – 15 Procedural FINAL Evaluations
RAD276, Term VII – 10 Procedural FINAL Evaluations
RAD286, Term VIII - Extra time to complete 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 –Memphis, TN

Telephone: (901) 761-9494

Campus President	Lee Jones	Ljones@concorde.edu
Academic Dean	Debbie Glines	Dglines@concorde.edu
Program Director	Jennifer Daniels	Jdaniels@concorde.edu
Clinical Coordinator	Brian Yee	Byee@concorde.edu
Instructor	Daniel Brown	Dbrown@concorde.edu

Clinical Time Sheet Fax: 901-761-3293

This fax number is for clinical time sheets ONLY. No other types of fax are approved.

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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	**Imaging Evaluation**
A. Evaluate Requisition	G. Anatomical Part(s)
B. Physical Facilities Readiness	H. Proper Alignment
C. Patient Care	I. Radiographic Technical Factors
D. Equipment Operation	J. Film Identification and/or Other Identifications
E. Positioning Skills	
F. Apply Principles of Radiation Protection	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 head 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. **All procedural evaluations & Re-Check's must be completed by the end of the 8th 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.

Procedure	M or E
Chest and Thorax	
Chest Routine	M
Chest AP (Wheelchair or Stretcher)	M
Ribs	M
Chest Lateral Decubitus	E
Sternum	E
Upper Airway (Soft-Tissue Neck)	E
Upper Extremity	
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
Lower Extremity	
Foot	M
Ankle	M
Knee	M
Tibia-Fibula	M
Femur	M
Trauma: Lower Extremity *	M
Patella	E
Calcaneus (Os Calcis)	E
Toe	E
Cranium	
Skull	E
Paranasal Sinuses	E
Facial Bones	E
Orbits	E
Zygomatic Arches	E
Nasal Bones	E
Mandible (Panorex acceptable)	E
Spine and Pelvis	
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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Procedure	M or E
Sacrum and/or Coccyx	E
Scoliosis Series	E
Sacroiliac Joints	E
Abdomen	
Abdomen Supine (KUB)	M
Abdomen Decubitus or Upright	M
Intravenous Urography	E
Fluoroscopy Studies	
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
Surgical Studies	
C-Arm Procedure (Orthopedic C-Arm)	M
C-Arm Procedure (Non-Orthopedic)	E
Surgical Cholangiography	E
Retrograde Pyelography	E
Mobile Studies	
Chest	M
Abdomen	M
Orthopedic	M
Pediatrics (age 6 or younger)	
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)

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.

GRADUATE COMPETENCIES

The following are the basic graduate competencies in which each student must demonstrate proficiency upon completion of the program.

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

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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; 0.5 REM (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.

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RADIOLOGIC TECHNOLOGY PROGRAM

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 EVALUATION 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 Clinical Evaluation Form

STUDENT: _____DATE: _____

EVALUATOR: _____EXAM:_____ACCESSION #_____

TYPE OF EVALUATION: COMPETENCY ( ) RECHECK ( )

This competency evaluation form (double sided) 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 student perform the exam and then 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**.

Point Scale 0 = performance is unacceptable – Termination of this evaluation.
1 = performance meets some objectives, improvement needed
2 = performance meets objectives, (i.e. according to student's clinical level).

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

		Position/Projection			Position/Projection			Position/Projection		
	(print the position/projection done)	A.			B.			C.		
	PERFORMANCE EVALUATION: completed by staff technologist, preceptor, or Concorde CI (12 PTS.)	0.	1.	2.	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									

Were repeats needed? (check one) ☐ NO ☐ YES – if yes, make comments below as to "Why repeated was required."

Comments: _____

_____

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

Instructor Signature: _____ Date: _____

Student Signature: _____ Date: _____

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RADIOLOGIC TECHNOLOGY PROGRAM Clinical Evaluation Form

STUDENT: _____DATE: _____

EVALUATOR: _____EXAM:_____ACCESSION #_____

TYPE OF EVALUATION: COMPETENCY ( ) RECHECK ( )

This competency evaluation form (double sided) 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 student perform the exam and then 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**.

Point Scale 0 = performance is unacceptable – Termination of this evaluation.
1 = performance meets some objectives, improvement needed
2 = performance meets objectives, (i.e. according to student's clinical level).

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

		Position/Projection A.			Position/Projection B.			Position/Projection C.		
COMPLETE THIS PORTION UPON ACTUAL IMAGE EVALUATION: w/Concorde CC (10 PTS.)		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									
NUMBER OF POINTS SCORED:										
PERCENTAGE SCORE/GRADE		/22			/22			/22		

Comments: _____

_____

Instructor Signature: _____ Date: _____

Student 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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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:_____

Clinical Experience Date Range:_____

CI name & facility:_____

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

Students may either email timesheets to Byee@concorde.edu or fax timesheets to 901-761-3293 with Attn: Brian Yee, CC at the end of each week

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APPENDIX D: STUDENT EXAM LOG

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CONCORDE

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	_____	IVPs	_____

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APPENDIX E: LOG BOOK TOTALS FORM

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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 _____

IVP's _____

Abdomen _____

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APPENDIX F: PERFORMANCE & PROGRESS ASSESSMENT FOR RAD136 & RAD146 ONLY

(Clinical Instructor & Clinical Preceptor)

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RADIOLOGIC TECHNOLOGY PROGRAM
Performance & Progress Assessment

Student Name _____Date _____Term_____

Clinical Assignment _____ Evaluator _____

TERMS III & IV ONLY (RAD136 & RAD146) **(Circle One)** Mid / Final / Weekly

INSTRUCTIONS: Circle the number that best describes the student's clinical performance. Please make comments to explain the score. Remember, the evaluation is **ONLY to document** the student's Performance & Progress **since the last term III or term IV evaluation** was completed.

CATEGORY	Meets Expectations	Needs Minor Improvement	Needs Major Improvement	Failing
1. *Understand basic protocols*	Understands and can describe what is needed for any exam or procedure. 10	Usually understands and can describe what is needed for any exam or procedure. 9	Sometimes understands and can describe what is needed for any exam or procedure. 8	Seldom understands and can describe what is needed for any exam or procedure 7
COMMENTS				
2. *Quality of images procedures.*	Requires little correction; consistently above average; recognizes mistakes and takes corrective measures. 10	Usually accurate; makes only average number of mistakes 9	Sometimes accurate, makes more than an average number of mistakes. 8	Makes frequent errors; demonstrates little retention; poor patient care and organization 7
COMMENTS				
3. *Proper documentation (hand in eval's at proper time, read physician's orders)*	Consistently submits evaluations/assessments for completion on time. Read's physicians' orders prior to performing exams. 10	Usually submits evaluations/assessments for completion on time. Read's physicians' orders prior to performing exams. 9	Sometimes submits evaluations/assessments for completion on time. Sometimes forgets to read physicians' orders prior to performing exams 8	Seldom submits evaluations/assessments for completion on time. Has forgotten to read physicians' orders prior to performing an exam numerous times. 7
COMMENTS				

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4. *Willingness to assist / do exams*	Very industrious; Does more than is expected 10	Somewhat industrious; Usually does more than is expected 9	Does just enough to get by, rarely does more than what is expected; does not like to perform already competed exams. 8	Does not meet minimum requirements; student tends not to work when possible. 7
COMMENTS				
5. *Patient care*	Communicates well with patients; anticipates patients' needs; Demonstrates great concern for patients' comfort 10	Talks with patients; makes the patients comfortable; Demonstrates active concern for patients' needs 9	Sometimes talks with patients; patients' need to ask for comfort items 8	Seldom talks to the patients; mumbles directions; talks to self during the procedure instead of the patient 7
COMMENTS				
6. *Attendance*	On time everyday. Never absent. 10	On time to clinical. When absent, uses the proper call-in procedure 9	Sometimes absent or tardy to clinical. Uses the proper call-in procedure. 8	Sometimes absent or tardy to clinical. Has not used the proper call-in procedure. 7
COMMENTS				
7. *Interpersonal relationships.*	Excellent attitude and behaviors; Has spirit of cooperation; demonstrates excellent leadership qualities 10	Above average, cooperative; good team leader; interacts well with staff and physicians 9	Sometimes accepts direction in manner showing displeasure; can be difficult to work with 8	Inclined to be quarrelsome; spirit of cooperation and attitude/behavior not satisfactory 7
COMMENTS				
8. *Clean and stock rooms and clean cassettes*	looks for things to do; hard worker; always productive 10	Above average; usually utilizes time efficiently 9	Puts forth some effort; has to be reminded of what to do; does just enough to get by 8	Puts forth no additional effort; most of the time requires constant supervision 7

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COMMENTS				
9. *In proper uniform* *(ID's, Markers, watch, hair off collar, Radiation badge, shoes)*	Consistently presents a professional image; always well groomed and careful about appearance; always is within Dress Code 10	Sometimes has come to clinical with an ungroomed appearance; has been advised once regarding dress code violations. 9	Sometimes has come to clinical with an ungroomed appearance; has been advised twice or more regarding dress code violations. 8	Personal appearance unsatisfactory; tries to hide Dress Code violations 7
COMMENTS				
10. *Ethics*	Conducts self in a professional manner at all times; inspiring to others and impressive in professional performance 10	Above average impression; demonstrates professionalism in stressful situations 9	Average impression; Usually adheres to professional standards in an acceptable manner 8	Demonstrates a negative behavior; rude and arrogant to patients, staff and fellow students 7
COMMENTS				
Sub-Total of Points in Each Column	_____	__ _____	_____	_____
Total Eval Points				_____ / 100
Total Percentage				_____ %

SUMMARY COMMENTS (if applicable)

_____

_____

_____ _____

Evaluator Signature Date

_____ _____

Student Signature Date

_____ _____

Preceptor Signature (if applicable) Date

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APPENDIX G: PERFORMANCE & PROGRESS ASSESSMENT

For RAD 256, 266, 276, & 286

(Clinical Instructor & Clinical Preceptor)

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RADIOLOGIC TECHNOLOGY PROGRAM

Performance & Progress Assessment

Student Name _____Date _____Term_____

Clinical Assignment _____Evaluator _____

(Circle One) Mid / Final / Weekly

INSTRUCTIONS: Circle the percentage that best describes the student's clinical performance. Please make comments to explain the score. Remember, the evaluation is **ONLY to document** the student's Performance & Progress **since the last evaluation** was completed.

CATEGORY	Exceeds Expectation	Meets Expectations	Below Expectations	Failing
1. Comprehension of Examinations	Always understands and can describe what is needed for any exam or procedure. 100 94	Most often understands and can describe what is needed for any exam or procedure. 92 85	Sometimes understands and can describe what is needed for any exam or procedure. 83 75	Seldom understands and can describe what is needed for any exam or procedure 0
COMMENTS				
2. Quality of Work	Superior; consistently competent; exceptionally high quality of performance in all phases of practical applications 100 94	Is exact, precise, requires little correction; consistently above average; recognizes mistakes and takes corrective measures. 92 85	Usually accurate; makes only average number of mistakes 83 75	Makes frequent errors; demonstrates little retention; poor patient care and organization 0
COMMENTS _____				
3. Organization of Work	Is highly organized; performs work in proper sequence; understands and demonstrates how to set priorities. 100 94	Does well in performing work in proper sequence; seldom needs assistance in setting priorities. 92 85	Usually performs work in proper sequence; often needs assistance in setting priorities. 83 75	Has difficulty in performing work in proper sequence; very often needs help in setting priorities. 0
COMMENTS				

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4. Quantity of Work	Superior work -- always productive; consistently does more than is expected 100 94	Very industrious; usually does more than is expected 92 85	Does just enough to get by, rarely does more than what is expected 83 75	Does not meet minimum requirements; student tends not to work. 0
COMMENTS				
5. Patient Rapport	Communicates well with patients; anticipates patients' every need; Demonstrates great concern for patients' comfort 100 94	Talks with patients; makes the patients comfortable; Demonstrates active concern for patients' needs. 92 85	Sometimes talks with patients; patients' need to ask for comfort items; 83 75	Seldom talks to the patients; mumbles directions; talks to self during the procedure instead of the patient. 0
COMMENTS				
6. Performance Under Pressure	Highly confident in abilities; rarely requires reassurance; demonstrates great critical thinking skills; can change the procedure while in process. 100 94	Above average in demonstrating self reliance; occasionally requires reassurance; can change the procedure of simple exams while in process 92 85	Average level of self confidence; acceptable with level of learning; seeks guidance when necessary; unable to change procedure while in process 83 75	Continuous reinforcement and guidance is required; lacks confidence continuously; is never assigned to difficult cases. 0
COMMENTS				
7. Interpersonal Relationships	Excellent attitude and behaviors; Has spirit of cooperation; demonstrates excellent leadership qualities. 100 94	Above average, cooperative; good team leader; interacts well with staff and physicians. 92 85	Sometimes accepts direction in manner showing displeasure; can be difficult to work with 83 75	Inclined to be quarrelsome; spirit of cooperation and attitude/behavior not satisfactory 0

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COMMENTS				
8. Initiative	Thinks and acts constructively; looks for things to do; hard worker; no supervision needed; always productive 100 94	Above average; minimum supervision; utilizes time efficiently 92 85	Puts forth little effort; frequently has to be told; sometimes lazy; does just enough to get by 83 75	Puts forth practically no effort; lazy; most of the time requires constant supervision 0
COMMENTS				
9. Judgment	Very impressive in thinking things through and making good decisions. 100 94	Always handles difficult situations with authority and ease; outstanding ability to learn and apply new tasks 92 85	Average in performance; sometimes becomes frustrated or uses poor judgment in stressful situations 83 75	Frequently uses poor judgment; often becomes frustrated in stressful situations. 0
COMMENTS				
10. Personal Appearance	Consistently presents a professional image; always well groomed and careful about appearance; always is within Dress Code. 25			Personal appearance unsatisfactory; tries to hide Dress Code violations. 0
COMMENTS				
11. Professional Ethics	Conducts self in a professional manner at all times; inspiring to others and impressive in professional performance 100 94	Above average impression; uses good judgment in stressful situations 92 85	Average impression; adheres to professional standards in an acceptable manner 83 75	Often does not follow professional standards when dealing with others; negative behavior; rude and arrogant to patients, staff and fellow students. 0

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COMMENTS				
Sub-Total of Points in Each Column	_____	__ _____	_____	_____
Total Eval Points				_____ / 1025
Total Percentage				_____ %

SUMMARY COMMENTS (if applicable)

_____

_____

_____

_____

_____

_____

_____ _____

Evaluator Signature Date

_____ _____

Student Signature Date

_____ _____

Preceptor Signature (if applicable) Date

Revised: 4-12-2010

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

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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.

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

APPENDIX I: CLINICAL DISMISSAL

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 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.

_____

PRINT – Student's Name

_____ _____

Student's Signature Date

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APPENDIX J: ROOM ORIENTATION FORMS

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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:

_____

_____

_____ _____ _____

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:

_____

_____

_____ _____ _____

Evaluator's Signature Date Student Signature

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Level 1 Clinical Competency Evaluation
Patient Care and Safety

Student: _____

Date: _____ Room: _____ Evaluator: _____

	OBJECTIVE: This student can correctly demonstrate the knowledge of:	✓ 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:

_____

_____

_____ _____ _____

Evaluator's Signature Date Student Signature

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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:

_____

_____

_____ _____ _____

Evaluator's Signature Date Student Signature

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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:

_____

_____

_____ _____ _____

Evaluator's Signature Date Student Signature

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