



**Radiologic
Technology Program**

**Student Clinical
Handbook**

(and syllabi for RT 171,172,176,177,271,276,277)

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INTRODUCTION

The purpose of this student clinical handbook is to guide the Radiologic Technology student through all aspects of their clinical training. It provides resource information relevant to this training program as well as the total profession.

The following pages contain program description, clinical standards and policies, record keeping materials related to clinical experience hours, and classifications of studies performed. The goals are well identified for each level of training, and progress evaluation forms are provided. The final section contains a time flow chart and application forms for State certification and National registry.

The total content of this workbook is designed to guide the student toward becoming a well-trained and employable Radiologic Technologist.

All information contained within is the specific responsibility of the Rad Tech student and will be used to direct the student through the clinical phase of the program and successful program completion.

Failure to comply with clinical requirements as outlined in this manual can result in program dismissal.

GENERAL PHILOSOPHY

In keeping with the District policy to provide post high school education for all high school graduates, the Radiologic Technology Program will include the following:

1. Occupational training in the area of Radiologic Sciences. The purpose of this instruction is to qualify the student for examination by the ARRT (American Registry of Radiologic Technologists) and the CRT (California Department of Public Health) and to prepare the student for gainful employment in the field.
2. Clinical experience for each student in the Radiologic Technology Program in a directly supervised radiographic facility such as hospital, radiology office, and imaging center.
3. Guidance program by the instructional staff and the College to assist students, regardless of their background or ability, to gain from the educational experience, to motivate, and to orient to the medical profession and its opportunities.
4. Cooperation with professional associations and related organizations in order to bring in-service or continuing education to the members of the profession, its leaders and its educators.

RADIOLOGIC TECHNOLOGY DEPARTMENT PHILOSOPHY

The philosophy of the Radiologic Technology Department concurs with and evolves from the philosophy of the college and the concept of education as set forth by the American Society of Radiologic Technologists and the Joint Review Committee in Education in Radiologic Technology.

The department has agreed upon the following as the basic foundation for the instructional program:

1. To graduate an appropriate number of students, therefore meeting the needs of the community.
2. To provide a program that reflects current trends in course content and instructional modality, presented in a meaningful sequence.
3. To provide an effective student screening mechanism in order to determine program admission.
4. To perform ongoing evaluation of student performance in both the classroom and clinical area in order to further evaluate their aptitude for the profession.
5. To coordinate didactic and clinical instruction.
6. To provide a structured well-rounded clinical educational experience.
7. To work cooperatively with other radiologic technology programs.
8. To work cooperatively with other Allied Health programs within the division.
9. To graduate students who can satisfactorily function in general diagnostic radiology.
10. To instill the concept of continued education and lifelong learning.
11. To identify the need to participate in the Radiologic Technology organizations at all levels.
12. To prepare the student to function as a member of the health care team.

MISSION STATEMENT

The Mission of the Radiologic Technology program is to prepare qualified medical imaging practitioners, who will support the highest level of ethical patient care, while employing competent technical practices. A commitment to professional growth and life long learning will be developed.

PROGRAM GOALS/ STUDENT LEARNING OUTCOMES:

Goal: Students will be clinically competent and ready to begin a successful career in the Radiologic Sciences.

SLO: Students will be able to perform entry-level radiographic procedures.

SLO: Students will be able to demonstrate radiation safety and ALARA principles.

Goal: Students will be able to demonstrate professional and ethical behaviors

SLO: Students will be able to express the characteristics of providing humanistic health care.

SLO: Students will be able to demonstrate age specific patient care skills.

SLO: Students will be able to demonstrate professional behaviors/professionalism.

Goal: Students will exhibit the communication skills necessary to effectively perform the duties of a Radiographer in a variety of health care environment

SLO: Students will express effective oral communication skills

SLO: Students will demonstrate written communication skills

Goal: Students will demonstrate independent critical thinking skills to solve clinical practice related problems to optimize diagnostic outcomes

SLO: Students will evaluate radiographic images for diagnostic quality

SLO: Students will accurately modify technical factors to produce diagnostic quality images.

DEPARTMENT STAFF

PROGRAM DIRECTOR:

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INSTRUCTOR/
CLINICAL COORDINATOR:

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DIRECTORY

ASRT Executive Office
1500 Central Avenue SE
Albuquerque, NM 87123
Lynn May, Exec. Director
(800) 444-ASRT

Joint Review Committee on
Education in Radiologic Technology
20 N. Wacker Drive, Suite 900
Chicago, IL 60606
(312) 704-5300

A.R.R.T. Executive Office
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Jerry Reid, Exec. Director
(612) 687-0048

C.S.R.T. Executive Office
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Pleasanton, CA 94566
(310) 782-0927; (310) 787-0478 Fax only
Email: email@csrt.org

California Department of
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Radiologic Health Branch
P.O. Box 997414
Sacramento, CA 95899-7414
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RADIOLOGIC TECHNOLOGY PROGRAM

PROGRAM OPERATION

A. Program Director

The program director must be a full-time faculty member within the program. Required certification by the ARRT and the state (CRT) is mandated. Must be an experienced radiographer with a minimum of five years experience. Must have a baccalaureate degree with a minimum of three years of experience as an instructor. Membership in appropriate professional organizations (ASRT, CSRT, AEIRS, RTEC) is highly recommended.

B. Instructional Staff

Full-time and part-time instructors in the program shall be certified by the American Registry of Radiologic Technologists (ARRT), holder of a current C.R.T., and possess any other District required documentation. They shall have had at least five years experience in radiologic technology. Possess two years experience in radiologic technology with baccalaureate degree or six years with any associate degree.

C. Medical Advisor

The medical advisor shall be certified by the American Board of Radiology. He/she shall be a full-time practicing radiologist in an affiliated hospital with at least five years experience in radiology. They may or may not be a part of the general teaching staff but will consult with and advise the program director.

D. Clinical Educator (clinical affiliate)

Clinical educators shall be A.R.R.T. and C.R.T. certified and have two years of professional radiographer experience. As adjunct faculty, they shall work cooperatively with college faculty in the clinical management of assigned students.

E. Curriculum

The curriculum must meet the generally accepted curriculum recommendations by the Joint Review Committee (JRCERT), the American Society of Radiologic Technologists (ASRT) and the California Department of Radiologic Health (RHB).

F. Counseling

It is the responsibility of each of the instructional staff to guide and direct students individually or in groups in industry orientation, job opportunities, and occupational counseling.

Students with identified problems in either classroom or clinical education will be counseled by the entire staff on an individual need basis. Written records of all conferences shall be kept.

Permission for students to waive, substitute, or give final graduation approval or associate degree or certificate is through the Program Director and graduation office in accordance with the college's graduation requirements.

Every graduating student will have his progress reviewed by the Allied Health Counselor or equivalent in the fall semester of the 2nd year and follow the graduation check procedure as directed.

Failure to have all required courses for AS degree completed by the end of the final spring semester will cause the student to be ineligible to sit for the external exam(s).

RADIOLOGY CLUB

1. Each class level has its president/student rep who speaks for the class at the various meetings and functions.
2. Meetings should be student instigated but directed by the faculty club advisor and should be educational in nature and supplement the instructional program.
3. Fund-raising club functions should be promoted to provide funds for identified activities.

SCHOLARSHIPS OR STUDENT GRANTS

1. The Radiologic Technology program scholarships available, specifically for Rad Tech students. These scholarships are offered only to 1st year students who plan to continue into the 2nd year of the program. Scholarship information and applications will be coordinated through the Rad Tech faculty and OCC scholarship office. It is the student's responsibility to submit completed applications within the designated deadlines.
2. Rad Tech students are also eligible for the following scholarships:
 - 1) General scholarships offered through ASOCC.
 - 2) Radiologic technology professional organizations such as American Society of Radiologic Technologists (ASRT). Call ASRT (800) 444-ASRT for further information.

JOB OPPORTUNITIES

Each instructor should assist students in finding jobs where possible and should share student need and placement with other staff.

RADIOLOGIC TECHNOLOGY PROGRAM STANDARDS

No applicant shall be admitted who has not met the academic, physical/mental health, and immunization requirements outlined in the college catalog or as determined by the program.

Applicant must not be under the treatment for substance abuse currently, nor within the six months prior to the date of application. It is the intention of the Coast Community College District to provide an environment that maximizes academic achievement and personal growth. The District recognizes that alcohol and other drug use or abuse poses a significant threat to the health, safety and well-being of users and the people around them. OCC is committed to a drug-free campus so that students and staff can work in a drug-free environment. There are state laws and the College Code of Conduct, which specifically prohibit the use, possession, distribution, or sale of drugs or alcohol on college property or any **college sponsored activity or event**. District policy prohibits the use of alcohol and other drugs on District property regardless of its location. The use of tobacco is also prohibited in all District buildings and vehicles.

The College and program also have a zero tolerance policy regarding the possession or use of any weapon while on campus or during clinical assignments.

Applicant must be able to perform the specific physical manipulative and/or sensory functions as required by the Radiologic Technology program.

Read carefully the following statements identifying the standards appropriate to the profession of Radiologic Technology and sign at the bottom. Your signature certifies your ability to comply with these standards. Failure to comply with these standards can result in program dismissal.

STUDENT RADIOLOGIC TECHNOLOGIST

POSITION SUMMARY: The student radiologic technologist learns how to accurately demonstrate body structures on a radiograph or other receptor by determining proper exposure factors, manipulating medical imaging equipment, evaluating the radiographic image/quality, and providing for patient protection, safety, and comfort during radiographic procedures. The student technologist also assists the physician team member in specialized procedures, which often require the administration of chemical mixtures to the patient for enhanced viewing of the anatomy and physiology of body systems.

ESSENTIAL TECHNICAL STANDARDS AND/OR FUNCTIONS FOR RADIOLOGIC TECHNOLOGY STUDENTS

PHYSICAL DEMANDS

In order to ensure student and patient safety and welfare, the radiologic technology student must be able to:

1. **Stand and/or Walk** in an erect posture for up to 8 hours per day.
2. **Lift** a minimum of 35 pounds from floor level to waist level.
3. **Lift** a minimum of 10 pounds from waist level to shoulder level.
4. **Carry** a minimum of 20 pounds directly on the arms or hands while walking a distance of 100 feet.
5. **Bend or Flex** the upper trunk forward up to 45 degrees, and **Flex** the lower torso into a squatting position.
6. **Rotate** the upper trunk up to 30 degrees to the right or left from a neutral position while standing or sitting.
7. **Reach** a maximum of 72 inches above floor level and/or a full-arms reach.
8. **Push and/or Pull** objects and equipment weighing up to 250 lbs.; i.e., portable x-ray machine.
9. **Manipulate** radiographic and medical equipment and accessories utilizing fingering and/or reaching, pulling, extending.
10. Utilize the sense of **Hearing and/or Lip Reading** to effectively communicate with the patient and health care team.
11. Utilize the sense of **Vision** in all levels of the radiology department or hospital lighting, which varies from low levels of illumination to amber/red lighting to bright light levels.

NON-PHYSICAL DEMANDS

1. **Respond** quickly and appropriately to emergency situations.
2. **Communicate** effectively at all times (both verbally and in writing) with physicians and patients and staff using the English language.
3. **Tolerate** strong, unpleasant odors.
4. **Handle** stressful situations related to technical and procedural standards and patient care situations, so that job performance is not compromised.
5. **Provide** physical and emotional support to the patient during radiographic procedures.
6. **Conduct oneself** in a professional manner, be on time for required clinical assignments, adhere to dress codes, and always maintain a neat and well-groomed appearance, free of body odors, maintaining appropriate hygiene, both in clinical and classroom.
7. **Adhere to** all medico-legal policies related to the administration of radiologic technology.

INTELLECTUAL CAPACITY

Demonstrates the capacity to learn by:

1. Performing radiologic examinations according to clinical objectives.
2. Administering safe patient care.
3. Assessing patient status for performing certain types of radiological examinations, and communicate findings to the appropriate supervisor.
4. Responding appropriately in new and emergency situations.

SPECIFIC PHYSICAL NEEDS

The radiography student must possess the following capabilities:

1. **Self-mobility** with the ability of propelling wheelchairs, stretchers, etc, alone or with assistance as available. The student must be ambulatory and able to maintain a center of gravity when met with opposing force as in lifting, supporting, and transporting a patient. The student must be able to transport patients within the department and in the clinical education center at large.
2. **Visual acuity** that allows the student to (a) distinguish whether the x-ray beam is perpendicular, horizontal, or angled through the anatomical area being examined, (b) perform the required radiography procedures that involve the preparation of contrast agents for introduction into anatomic structures such as syringes or IV bottles, (c) determine the correct dosage of contrast according to product labels, (d) identify the correct patient by reading patient identification arm bands and/or charts, (e) correctly set the x-ray generator controls to obtain optimum diagnostic quality radiographs, (f) perform data entry tasks using digital and computer terminals, and (g) view and evaluate the recorded images for the purpose of identifying proper patient identification, positioning, radiographic technique, And radiographic quality.
3. **Hearing acuity and/or Lip Reading** that is sufficient to communicate with the patients and the health care team. The student must be able to hear and respond to patient questions and directions from department and hospital staff.
4. **Manual dexterity** that allows the student to grasp and manipulate small objects required to perform radiographic procedures and operate radiographic equipment such as locks, beam limiting devices, radiation protection devices, vials, syringes, intravenous systems, catheters, dressings and sterile trays. The student must also be able to properly handle and process radiographic images using automatic processors.
5. **Orally communicate** in English in a voice that is clear and loud enough to be understood by a person in the radiology department in surgery, in the clinical education center at large, or on the telephone.

Applicant Statement:

Having read and understood the above statements, I certify that I have no physical or emotional conditions that would prevent me from performing the above listed standards. I will adhere to the above standards and fully understand that **non-compliance in any one area will result in Program dismissal.**

Applicant's Name (please print)

Student Signature

Date

In accordance with the Americans With Disabilities Act, (ADA) Public Law 101-336, the Orange Coast College Radiologic Technology Program makes every effort to make reasonable accommodation to any qualified individual with a disability. All accommodation requirements will be coordinated with DSPS on campus. The program will not discriminate against any individual because of age, gender, ethnic background, sexual orientation, political affiliation, or disability.

RADIOLOGIC TECHNOLOGY PROGRAM POLICIES THE

PROGRAM FACULTY WILL:

1. Strive to provide meaningful learning experiences to all students.
2. Maintain an ongoing evaluation of the student related to their aptitudes.
3. Freely meet with individual students or groups for any purpose.
4. On an individual basis attempt to guide each student in his/her academic and professional career.

STUDENT RESPONSIBILITIES:

I understand that I must comply with the following standards. If I fail to do so, I am aware that I may be placed on probation or dismissed from the program.

1. Maintain a 2.0 GPA overall.
2. Earn a "C" or better in all required Rad Tech program courses.
3. Classroom/clinical absences must not **exceed four (4) per semester**. Four (4) absences constitute a critical incident report and more than four (4) absences could result in dismissal from the Radiologic Technology program. This includes lecture, laboratory, and clinical classes. Should this occur, students may pursue the grievance process as outlined in the college catalog.
4. Must not accept excessive outside employment, which might jeopardize successful program completion (recommend no more than 20 hrs/wk). Modification of required clinical assignment because of outside employment **will not be permitted**. Outside employment must be so scheduled as not to conflict with clinical schedule.
5. Have a means of reliable transportation to the clinical assignment.
6. Demonstrate continued satisfactory clinical performance, as defined by the clinical instructors/coordinators.
7. Have sufficient communication skills (both verbal and written) to meet all required clinical objectives and to effectively communicate with patients, physicians, and clinical staff.
8. Maintain a satisfactory professional appearance and behavior in the clinical areas.
9. Demonstrate readiness to enter the health care profession as evidenced by emotional maturity, responsibility, and willingness to learn and completion of all program requirements, clinical objectives and competencies.
10. The student will be required to have completed a physical examination and immunization before the first day of clinical assignment. The cost of the physical examination shall be the student's responsibility. The Student Health Center can provide some services to the student.
11. Prior to beginning clinical education each student will be required to complete an MR Safety/Compatibility Questionnaire in RadT 105 Radiation Safety.

12. **For successful program completion**, the student must complete the following:

- 1) All clinical objectives including required procedure evaluations for 1st and 2nd year.
- 2) Program required clinical hours.
- 3) All Rad Tech program courses,
- 4) ARRT required core clinical competencies, radiographic exams, and patient care procedures.
- 5) All General Education requirements to meet OCC A.S. degree. These general education requirements must be completed **no later** than the spring semester of the 2nd year of the program in order to be eligible for the required State and Registry Examinations.

NOTE: No student will be permitted to sit for post program exams until all of the above requirements have been met.

Student Name (print please)

Student Signature

Date

Criminal Background Check

All students are required to complete a criminal background check to start the program. The background check includes, fingerprinting, Social Security number and address verification, DOJ & FBI criminal history, state sex offender and a Medicare/Medical sanctioned fraud list (OIG/GSA search). The background check will be performed by a District approved service. Failure to pass the check can result in program dismissal. The student can pursue the action through the college due process/grievance process.

Confidentiality of Student Records

All records/documentations (classroom and clinical) pertaining to enrolled students will kept be confidential according to program policy. Student information is protected under FERPA law.

Non- work/staffing position statement

Students are not to be considered nor assigned as imaging radiographers during their enrollment in clinical education. **No student is to be utilized in lieu of regularly scheduled staff.**

Compliance statement for Clinical policies and procedures

I declare that I have read all the information contained within the Student Clinical Handbook and will comply with all program policies/procedures. Failure to do so will result in disciplinary action including program dismissal. I have the right to pursue the college due process grievance procedure.

Student Name (print please)

Student Signature

Date

RADIOLOGIC TECHNOLOGY POLICY

Pregnancy Policy

Purpose:

To establish guidelines to be followed by pregnant radiation workers (Student Radiologic Technologists.)

Policy: Radiation Safety for Pregnant Student Radiologic Technologists

State Radiation and Nuclear Regulatory Commission Regulations, (available to the student in each clinical affiliate) require that the fetus of a radiation worker not receive a dose equivalent in the excess of 1.5 rem (500 mrem or 5 mSv) during the entire pregnancy. Additionally, these regulatory bodies have urged that the monthly fetal dose equivalent not exceed 0.05 rem (50 mrem) over the course of the pregnancy.

Students are **advised** to declare their pregnancy in writing, to a program official (Director/Clinical Coordinator) as soon after conception as practical. **This is a voluntary declaration and will not affect the student's status within the program.** Upon program notification an additional radiation monitoring device will be ordered. This additional monitoring device is to be worn at the waist level, and inside any lead apron worn. This badge will monitor the fetal dose. The regulatory-issued film badge should continue to be worn at the collar level, outside any lead apron to estimate the worker's head (whole body) dose.

It is important to remember that reduced radiation limits go into effect at the time the pregnancy is declared and not at the time of conception. The program cannot declare the pregnancy for you. You are **not required** to declare the pregnancy, however the radiation safeguards your baby deserves cannot be applied until the pregnancy is **declared in writing.** In addition, you may at any time **withdraw your declaration of pregnancy in writing.**

To assure that fetal dose does not exceed this 50 mrem/month limit, the pregnant student's dosimetry report will be monitored monthly. Should the student request it, modifications will be made to the student's clinical schedule.

Radiologic Technology students who follow proper rules of distance and shielding should never exceed 50 mrem to the abdomen per month. Pregnant student radiologic technologists, if they have not had the following diseases or immunization, should not have contact with patients who have the following:

- | | |
|---|-----------------------------|
| 1. Chickenpox | 3. Measles (Rubeola) |
| 2. Herpes Zoster, Shingles
(if student has not had chickenpox) | 4. German Measles (Rubella) |

These are infections in which there is a definite congenital syndrome that occurs after maternal infection.

The Pregnancy Declaration can be withdrawn at anytime by the student.

I acknowledge that I have received a copy of the Program Pregnancy Policy. My signature signifies that I understand the policy and will follow the guidelines. I understand that pregnancy is not cause for program dismissal, but may require an extension of clinical and/or didactic courses.

Student Name (print please)

Student Signature

Date

RADIOLOGIC TECHNOLOGY PROGRAM
Student Declaration of Pregnancy Status

Name: _____ Clinical Site: _____

In signing this form, it is acknowledge that:

The Program officials provided me information regarding fetal radiation exposure. I was given the opportunity to ask questions, which were satisfactorily answered. I understand the total fetal dose **must not exceed** 500 millirem (5mSv). I agree to wear the fetal radiation detection device at the clinical site and during on-campus labs.

I understand the Radiologic Technology Program and my Clinical Affiliate will take such precautions deemed necessary to protect me and the fetus safely from excess radiation exposure during my pregnancy. **I undertand that it is my responsibility to take appropriate precautions while in clinical training.**

I understand that pregnancy is not a reason for program dismissal, but may require an extension of clinical and/or didactic courses for reasons of radiation safety.

Declaration:

I **voluntarily declare** that I am approximately _____ months pregnant. Estimated due date is _____. Written proof of pregnancy, including any special considerations required by my physician has been provided to both program director and current clinical educator.

Student Options:

1. Clinical schedules and rotational assignments shall remain unchanged.
 2. Written request by student for modified clinical assignment or schedule.
- Modifications to the **clinical schedule or rotational assignments shall be voluntary.**
3. Voluntarily withdraw from the program and return following pregnancy.

I understand that option #2 may require additional clinical time following my pregnancy.

I understand that option #3 may well be conditional on time away from the program and clinical space available.

If I am in the program when my pregnancy has terminated, I shall notify program officials by completing the bottom portion of this form.

State option selected (see list above)_____.

Student Name (print please) Student Signature Date

This is to advise the program that I am **no longer** pregnant and no longer need special radiation safety considerations.

Student Name (print please) Student Signature Date

CLINICAL VENIPUNCTURE PROGRAM POLICY

To address the ARRT and Radiation Health Branch, (Calif. Dept. of Public Health) requirements for venipuncture and contrast media administration, Orange Coast College has incorporated venipuncture education into the second year curriculum. With satisfactory completion of this curriculum sequence the student meets the mandate of HSC 106985 and ARRT patient care competencies.

Students will be required to perform a total of 10 successful venipunctures on either phantoms or humans. All students will complete a total of 4 venipunctures in lab before attempting venipuncture on humans. If the student is unable to complete 6 venipunctures on humans they will need to complete the 10 venipunctures in lab.

The requirements for venipuncture clinical experience are:

1. Clinical participation will be permitted **only** if the clinical affiliate has a policy permitting students to perform venipuncture procedures. Otherwise, students will perform venipuncture at an alternate clinical site or in lab.
2. Clinical venipuncture will start after the student has successfully completed the venipuncture orientation.
3. Students **must be under direct supervision** for both venipuncture and the subsequent administration of contrast media.
4. If the student is unsuccessful, after the second stick attempt, the venipuncture procedure must be completed by appropriate health care personnel.
5. Completion of the Student Intravenous Access Record is required to document venipunctures performed:
 - a. Students will use the appropriate documentation required by their respective clinical site to document the venipuncture activity.
 - b. If the student is successful then the venipuncture will be recorded on the Intravenous Access Record, which verifies proficiency for that procedure.
 - c. If the student accumulates more than **3 failed procedures** as documented by the check list, additional attempts to perform contrast administration will be at the discretion of the clinical facility.
6. Adherence to policies:
 - a. The above outlined procedures must be followed for each procedure performed.
 - b. Students can only perform venipuncture for contrast media administration, during a normal scheduled clinical assignment.
 - c. Students must comply with the clinical affiliate's venipuncture policy.
 - d. Venipuncture site restricted only to upper extremity veins per state law.
 - e. Supervision requirement must be by appropriate healthcare personnel as determined by the clinical affiliate and applicable legislation..
7. Policy implementation date – Spring Semester (January 2013 revised).

Student Name (print please)

Student Signature

Date

CELLPHONE POLICY

The use of a personal cell phone, Bluetooth, Blackberry, iPhone, iPod, or other personal electronic device (PDA) for personal use may present a hazard or distraction to the user, co-workers, patients, and visitors. This policy is meant to ensure that the use of these devices will not disrupt clinical or didactic education and supports patient safety.

POLICY

Unless otherwise authorized, personal cell phones and other personal electronic devices must be in the silent or vibration mode at all times, in all classrooms, laboratories, and patient care areas especially while interacting with patients and clinical staff. **Individual Clinical Sites have the right to have students place their cell phones in storage during their clinical rotations.**

While incidental personal use is allowed, it must be limited to break and lunch periods in non-patient care areas whenever possible.

In addition to telephone services, many cell phones or personal electronic device providers offer additional functions and/or services including, but not limited to text messaging, web browsing, digital photography, audio-visual, and television. Students should not use any of these services in the clinical setting except during breaks and lunches and in non-patient care areas. On campus, these activities will be addressed by individual faculty. **Student use of a cell phone or other digital electronic device camera may never be used for patient photography or photographs of acquired images.**

Student Name (print please) Student Signature Date

FIT FOR CLINICAL DUTY

The Program has a responsibility to ensure patient and student safety when there is concern about a student's ability to perform their duties due to an impairment of any kind.

POLICY

Should Clinical Staff or a Clinical Educator feel a student is unable to perform their assigned duties in a safe manner, the Clinical Educator will seek a meeting with the student to determine possible causes. If the Clinical Educator feels the student should be removed from the clinical rotation, the Clinical Educator or designated staff member will notify the College and find transportation home for the student. Documentation of the incident by the Clinical Educator is required.

Prior to returning to their clinical assignment, the student must meet with the appropriate campus entities, including faculty. Based on the outcome of these meetings the Program may seek Program dismissal for the student.

As stated in the School of Allied Health Professions Student Manual, a clinical site can request a student to submit to a drug or alcohol screening test at the clinical site should circumstances warrant such an action. Should a student be found to be under the influence of an illegal drug or alcohol during a clinical assignment they will be removed from the Program immediately. This action is consistent with the Orange Coast College policy of zero tolerance. Any matter involving the student and potential program dismissal will adhere to the concept of due process including a formal conference in which the student will be given opportunity to present his/her case.

Student Name (print please) Student Signature Date

COMMUNICABLE DISEASE POLICY FOR STUDENTS

The Coast Community College District deals with communicable diseases in a manner, which balances the rights of the individual with concern for the public health of the college environment. The District uses the most recent edition of Control of Communicable Disease in Man, the report of the American Public Health Assoc., as its source for the definition of communicable disease and period of communicability. It is the responsibility of all students to comply with the following:

1. Medical Diagnosis – The Student Health Center staff may request the student suspected of having a communicable disease to obtain a diagnosis.
2. Contact with Health Department – Following the diagnosis, the Student Health Center staff shall comply with regulations of the Orange County Health Department.
3. Exclusion and Return to District Programs – In compliance with Orange County health Department standards and California Education Code regulations, a student with a communicable disease may be excluded from District programs. A written medical release is required for return to District colleges.

The primary role of the Coast Community College District in communicable disease control is educational. Proof of immunization shall not be a requirement as a condition for admission except in specific areas as prescribed by law. The Student Health Center in conjunction with the Orange County Health Department could offer immunization for specific diseases as needed. The Orange County Health Department may offer free immunization.

MEDICAL LEAVE POLICY

If during a clinical education course, a medical leave becomes necessary, the student must provide written notification to the program. This notification should state the estimated length of requested leave and a physician's verification.

Return to the program and clinical assignment requires a written physician's release and must state "**with no restrictions**". No student will be permitted to return to a clinical assignment unless he/she can resume full unrestricted duties. Returning students must meet with program officials to determine status for re-entry.

Student Name (print please)

Student Signature

Date

RADIATION CONTROL AND SAFETY POLICY

Purpose:

To provide information and to establish radiation safety guidelines for Student Radiologic Technologists.

All clinical facilities associated with the Orange Coast College Radiologic Technology Program have been approved by the California Department of Health Services, Radiologic Health Branch, as meeting the requirements of Title V of the California Administrative Code, Chapter 5, Subchapter 4, Radiation Control Standard.

All students are given instruction in radiation protection methods and must pass a safety test before they are permitted to use radiation producing equipment.

Students are required to adhere to radiation safety rules at all times. Students are responsible for their safety as well as the safety of their patients.

Radiation detection devices (dosimeter badges) are provided for each student by the program. These badges must be worn at all times while at the clinical facility and during campus laboratory activities. Students who fail to wear their film badges to either clinical or laboratory assignments, will be denied access and will be marked absent.

Records of all “student personal radiation exposure histories,” are provided to the college by the film badge supplier and shall be kept on file by program officials. **The student is required to initial their bi-monthly badge report to verify their radiation exposure. Dosimetry reports are kept by the Program indefinitely.**

Students are not expected to hold patients during radiographic procedures.

If a student has lost a film badge, the student will be issued a pocket dosimeter by the program. The pocket dosimeter must be worn during all laboratory and clinical assignments. Daily readings must be recorded on the appropriate form (see page 21). Students losing a film badge will be required to purchase a new one through the bursar’s office. Also, badges turned in late will incur a late charge, payable to the bursar’s office. Price will be determined annually.

The program will adhere to the NCRP recommendations from report 91, which states that radiation exposure as part of an educational experience, should not exceed 10 mSv annually or 20 mSV for the total program.

Monitoring will be documented by bi-monthly film badge readings. Any reading in excess of 0.3 mSv in reporting period will be investigated and the student receiving such will be counseled regarding correct radiation safety practices.

Student Name (print please)

Student Signature

Date

DEPARTMENT: ORANGE COAST RADIOLOGIC TECHNOLOGY PROGRAM
POLICY/PROCEDURE: DAILY DOSIMETER READINGS

MONTH/YEAR _____

Day 1: ___ rems

Day 12: ___ rems

Day 23: ___ rems

Day 2: ___ rems

Day 13: ___ rems

Day 24: ___ rems

Day 3: ___ rems

Day 14: ___ rems

Day 25: ___ rems

Day 4: ___ rems

Day 15: ___ rems

Day 26: ___ rems

Day 5: ___ rems

Day 16: ___ rems

Day 27: ___ rems

Day 6: ___ rems

Day 17: ___ rems

Day 28: ___ rems

Day 7: ___ rems

Day 18: ___ rems

Day 29: ___ rems

Day 8: ___ rems

Day 19: ___ rems

Day 30: ___ rems

Day 9: ___ rems

Day 20: ___ rems

Day 31: ___ rems

Day 10: ___ rems

Day 21: ___ rems

TOTAL: _____ rems

Day 11: ___ rems

Day 22: ___ rems

Note: This is a master form. Make a copy of this form when needed.

STUDENT and WORKERS Compensation Related Injury

Definition: Any **injury** that occurs while at an off-site related educational experience as an **enrolled student** in an **approved Orange Coast College course**. Can include: allied health clinical training, internships, field study experiences.

General Guidelines and Procedures:

1. The Coast Community College District provides worker's compensation coverage for students, who are assigned to a clinical education center. The coverage is in effect while the student is **on-site** at the clinical facility. The student must be officially enrolled in the designated clinical course in order to have valid coverage. No student is permitted to attend any clinical course until they have completed the required enrollment procedure at Orange Coast College.
2. This insurance covers an injury the student may receive during the course of a clinical assignment. **Injury must occur during the student's assigned clinical class time.**
3. Severity of the injury determines whether the student should receive treatment at the clinical site or be referred to Orange Coast College. (example of a severe on- site injury would be a needle stick.)

After Injury

1. Follow procedures established at the clinical site for emergency treatment which may include:
 - a. At hospital sites: immediate treatment may be provided at their employee health or emergency room (**only if approved by site**). **The student must inform the health care provider they are an OCC student and have workers compensation coverage.** The employee health or ER departments should call OCC Personnel office (714) 432-5670 for verification of coverage or off-site referral.
 - b. For minor injuries or non- hospital sites, students may do the following:
 1. Visit the OCC Personnel department in the Administration Building: ask for a referral to an approved Workers Compensation Clinic.
 2. Visit the OCC Student Health Center: indicate the injury occurred during clinical assignment and ask for a referral to an approved Workers Compensation Clinic.
 3. Call the OCC Personnel department and ask for a referral to a Workers Compensation Clinic (714) 432-5670.
2. To file a worker's compensation claim (**mandatory**), the student must adhere to the following:
 - a. **Report** injury to appropriate supervisor/clinical educator at the student's clinical site.
 - b. **Complete** required report form/documentation as required by the clinical affiliate.
 - c. **Get** medical attention as needed. See above options.
 - d. **Personally report** injury to OCC Personnel office (Administration Building) in person or by telephone (714) 432-5670, regarding your claim within 24 hours. If the incident occurs during the weekend, it must be reported the next working day. The student needs to provide Personnel Services with a copy of any form or receipt from the medical facility providing care.
 - e. A **written summation** of the incident by the student and a copy of all forms completed at the clinical site **must be submitted within one week** of the occurrence to the OCC faculty member responsible for their course (**program coordinator**, clinical coordinator, field study/internship instructor). Follow-up documents from the Coast Community College District may be required. Faculty should notify their Division Dean.
3. **Failure to follow the above procedures could result in the student being responsible for all medical expenses incurred.**

Student Name (print please)

Student Signature

Date

PROFESSIONAL LIABILITY INFORMATION

1. The Coast Community College District provides at no cost professional liability coverage for students who are assigned to a clinical education center.
2. This coverage addresses an injury or mishap that could occur to a patient while the student is performing their clinical responsibilities. This coverage is in force **only** during specific clinical assignments. **Note: The student must be officially enrolled in the designated clinical course in order to have valid coverage. No student is permitted to attend any clinical course until they have completed the required enrollment procedure at Orange Coast College.**
3. Additionally, students enrolled in the Radiologic Technology Program are required to maintain their own additional individual liability insurance. A policy will have to be purchased before the start of clinical training in October of the first semester. The policy will have to be renewed prior to the start of the second year.
2. The College District has identified a particular provider that all students are to use. Specific enrollment information will be provided during the first four weeks of the Program.
3. In the event such an injury/mishap should occur, the student must adhere to the following protocol:
 - a. Immediately report the incident to the appropriate supervisor/clinical educator at the student's clinical facility.
 - b. Complete required report form/documentation as required by the clinical facility.
 - c. Notify Program faculty within 24 hours. If the incident occurs during the weekend it must be reported the next school day to Program Director (714) 432-5540 or clinical coordinator(714) 432-5757.
 - d. Student must provide copies of all related incident report/documentation to program faculty.
 - e. A **written summation** of the incident **by the student** must also be provided to program director.
4. Handling of the claim will be facilitated by program faculty in conjunction with CHS Division personnel in compliance with Coast Community College policies.

Student Name (print please)

Student Signature

Date

**Standards for an Accredited Educational Program in Radiologic Sciences
Joint Review Committee in Education in Radiologic Technology**

The Radiologic Tech Program at Orange Coast College is a fully accredited program and adheres to requirements set forth by the California Radiologic Health Branch and the JRCERT.

To maintain full accreditation status the program must maintain the following:

Standard One – Integrity

The program demonstrates integrity in the following: representations to communities of interest and the public, pursuit of fair and equitable academic practices, and treatment of, and respect for, students, faculty, and staff.

Standard Two - Resources

The program has sufficient resources to support the quality and effectiveness of the educational process.

Standard Three - Curriculum and Academic Practices

The program's curriculum and academic practices prepare students for professional practice.

Standard Four – Health and Safety

The program's policies and procedures promote the health, safety, and optimal use of radiation for students, patients, and the general public.

Standard Five – Assessment

The program develops and implements a system of planning and evaluation of student learning and program effectiveness outcomes in support of its mission.

Standard Six - Institutional/Programmatic Data

The program complies with JRCERT policies, procedures, and **STANDARDS** to achieve and maintain specialized accreditation.

Compliant Procedure – Non compliance with JRCERT standards

Objective: If non-compliance of JRCERT standards occurs, students will have a mechanism to address complaints and correct the non-compliance

1. current JRCERT programs standards shall be available to all students
2. complaints of non-compliance shall be submitted in writing to Program Director. Within 10 days of receipt of complaint, the Program Director will investigate and take appropriate action. The Program Director shall then respond to the complaint in writing.
3. In the event that the above action is not satisfactory, the person initiating the complaint may take the matter first to:
- 4.

A) CHS Division Dean (714) 432-5531

If not satisfactorily resolved, then to:

B) Vice President of Instruction (714) 432-5016

If the problem is still not resolved satisfactorily, the student can then contact:

C) JRCERT (312) 704-5300

Signature of student

Print Name

Date

STANDARDS OF ETHICS OF THE AMERICAN REGISTRY OF RADIOLOGIC TECHNOLOGISTS

A: CODE OF ETHICS

This CODE shall serve as a guide by which Radiologic Technologists may evaluate their professional conduct as it relates to patients, colleagues, and other members of the medical care team, health care consumers and employers. The CODE is intended to assist radiologic technologists in maintaining a high level of ethical conduct.

1. The Radiologic Technologist conduct himself/herself in a professional manner, responds to **patient's needs**, and supports colleagues and associates in providing quality patient care.
2. The Radiologic Technologist acts to advance the principle objective of the profession to **provide services** to humanity with full respect for the dignity of mankind.
3. The Radiologic Technologist **delivers patient care** and service unrestricted by the concerns of personal attributes of the nature of the disease or illness, and without discrimination regardless of sex, race, creed, religion, or socioeconomic status.
4. The Radiologic Technologist practices technology founded upon theoretical knowledge and concepts, utilizes equipment and accessories consistent with the purpose for which they have been designed, and **employs procedures and techniques appropriately**.
5. The Radiologic Technologist assesses situations, exercises care, **discretion and judgment**, **assumes responsibility for professional decisions**, and acts in the best interest of the patient.
6. The Radiologic Technologist acts as an agent through **observation and communication** to obtain pertinent information for the physician to aid in diagnosis and treatment management of the patient, and recognizes that interpretation and diagnosis are **outside the scope of practice for the profession**.
7. The Radiologic Technologist utilizes equipment and accessories, employs techniques and procedures, performs services in accordance with an accepted standard of practice and **demonstrates in limiting the radiation exposure to the patient, self and other members of the health care team**.
8. The Radiologic Technologist **practices ethical conduct** appropriate to the profession, **protects the patient's rights** to quality radiologic technology care.
9. The Radiologic Technologist **respects confidence entrusted** in the course of professional practice, respects the patient's right to privacy, and reveals confidential information only as required by law or to protect the welfare of the individual community.
10. The Radiologic Technologist continually strives to improve knowledge and skills by participating in educational and professional activities, sharing knowledge with colleagues and investigating new and innovative aspects of professional practice. One means available to improve knowledge and skill is through professional **continuing education**.

**STANDARDS OF ETHICS OF THE
AMERICAN REGISTRY OF RADIOLOGIC TECHNOLOGISTS**

B: RULES OF ETHICS

The Rules of Ethics form the second part of the **Standard of Ethics**. They are mandatory and directive specific standards of minimally acceptable professional conduct for all present Registered Technologists and Applicants. Certification is a method of assuring the medical community and the public that an individual is competent to practice within the profession. Because the public relies on certificates and registration issued by the ARRT, it is essential that Registered Technologists and Applicants act consistently with these rules of Ethics. These Rules of Ethics are intended to promote the protection, safety and comfort of patients. **The Rules of Ethics are enforceable.**

1. **Compliance with State and Federal Law.**

A Registered Technologist or Applicant shall abide by state and federal laws. A conviction of, or a plea of guilty to, or a plea of nolo contendere to a crime which either is a felony or is a crime of moral turpitude is a violation of this rule.

2. **Maintenance of Valid State License or Registration.**

A Registered Technologist or Applicant shall at all times maintain a valid state license or registration to the extent required in the location(s) where the Registered Technologist or Applicant practices, and it shall be a violation of this Rule if the Registered Technologist's or Applicant's license or registration with any state is to any extent whatsoever revoked, suspended, conditioned, limited, qualified, subject to terms of probation, or restricted by a court, department, board, or administrative agency. A failure to comply with this Rule shall result in automatic denial of an Applicant's application for examination and certification by ARRT or in automatic revocation of the Registered Technologist's certification and registration with ARRT, as the case may be, unless the Registered Technologist or Applicant, by clear and convincing evidence, demonstrates that such denial or such revocation by ARRT would be clearly inappropriate. Decisions by ARRT are final.

3. **Duty to Submit Truthful Information to ARRT.**

A Registered Technologist or Applicant shall not submit any false or misleading information to ARRT in connection with any application or other information submitted to ARRT.

4. **Appropriate Patient Care.**

A Registered Technologist or Applicant shall provide appropriate patient care, and depending on the specific facts and circumstances of the allegedly standard or inappropriate care, the failure to do so may be a violation of this Rule.

5. **The Impaired Registered Technologist or Applicant.**

A physically, mentally or emotionally impaired Registered Technologist or Applicant should withdraw from those aspects of practice affected by the impairment. If the Registered Technologist or Applicant does not withdraw, it is the duty of the other Registered Technologists or Applicants who know of the impairment to take action to assure withdrawal of the impaired Registered Technologist or Applicant.

SCHOOL OF ALLIED HEALTH PROFESSIONS
CODE OF PROFESSIONAL ETHICS AND BEHAVIOR

RADIOLOGIC TECHNOLOGY PROGRAM

Health care professionals engaged in the performance of patient care must strive to maintain the highest personal and professional standards. The following conditions define the basic ethical and moral behavior that an allied health professional should conform to:

1. Respect all confidences that you may receive from your patients. Never discuss in public or during your breaks or in the elevator any incident that may have occurred in the medical facility or give out any information about your patients. All inquiries pertaining to your patient's condition, care or prognosis from family or friends must be referred to your supervisor or nursing staff.
2. Do not discuss your supervisor or team workers with other personnel or with patients.
3. Respect the patient's need for privacy at all times. Knock gently before entering the patient's room. Screen and drape your patient before all procedures. Provide adequate draping for examinations and treatments.
4. Give information contained in the patient's chart only to those people directly involved with the patient's care. The patient's chart is privileged and private information.
5. Show respect for your fellow workers at all times. Be loyal to your employer. Respect your co-workers and patients by referring to them by their surname unless otherwise requested. Never refer to patients by nicknames, illness or room number.
6. Accept responsibility graciously. Anticipate the patient's needs. Do not exceed your professional scope of practice.
7. Properly caring for patient's valuables will prevent the possibility of later embarrassment to yourself and the hospital. Treat the patient's personal effects, i.e., money, jewelry, clothes, dentures, glasses etc., as you would your own.
8. Assume the responsibility for your mistakes, errors, or misjudgments. Report them at once to your supervisor and college program coordinator, and fill out the appropriate report. Failure to do so may place you, your supervisor, the patient, the medical facility, and the college in jeopardy.
9. Treat each person with equal consideration and respect. Discrimination because of sex, race, creed, color, age, religion, socioeconomic or sexual orientation status has no place in patient care. Avoid promoting personal viewpoints to others. Do not allow personal likes or dislikes to affect the quality of care you give to your patient.
10. Respect the patient's religious beliefs and requests.
11. Avoid comments or actions that may be offensive or misinterpreted.

12. Do not discuss your personal or family life and problems with your patients.
13. Avoid loud, noisy behavior.
14. Treat the patient's family and visitors with courtesy and respect.
15. Do not accept gratuities in the form of money, gifts or tips from your patients.
16. Do not eat or drink in the patient care areas.
17. Be conservative regarding the use of medical supplies. Do not take home medical supplies, such as scrubs, linens, pens, hand lotion, etc.
18. Do not take medication from the hospital or patient or ask physicians to write prescriptions for you.
19. Do not diagnose or prescribe a treatment for any patient or for your family or friends. To do so is to practice medicine without a license.
20. Being under the influence of alcohol or drugs is grounds for dismissal. Any observed misuse of drugs should be reported to your supervisor immediately.
21. Remain at your assigned place of duty, leaving only when specifically authorized to do so, such as for lunch and rest breaks.
22. Be polite and courteous when answering the phone. Channel all phone calls to the appropriate person. Doctor's telephone orders are to be documented according to policy. Do not use the business phones for personal calls.
23. The allied health professional shall continually strive to increase and improve their knowledge and skills by participating in educational and professional activities.
24. The allied health professional shall be familiar with existing State and Federal laws governing particular areas of practice.

Student Name (please print)

Student Signature

Date

RADIOLOGIC TECHNOLOGY (DIAGNOSTIC)

The Radiologic Technologist prepares demonstrations of human anatomy on an x-ray film or fluoroscopic screen for diagnostic use by a radiologist or other medical specialist. Graduates of the program are eligible for examination by the American Registry of Radiologist Technologists. Successful applicants have the right to use the title of "Registered Radiologic Technologist" (RT(R)). In order to practice in California, the R.T. **must also apply** for certification by the Department of Public Health in Sacramento. Completion of the Associate in Science degree and two-year certificate program qualifies the student for eligibility for state required examination (s).

The Orange Coast College Radiologic Technology program is approved by the Joint Review Committee on Education in Radiologic Technology and the California Department of Public Health and is affiliated with numerous hospitals In Orange County. In this training consortium students are rotated through planned learning experiences. Classrooms are well equipped and include on campus energized x-ray laboratories.

Program application process is accomplished by taking program prerequisite Allied Health 010. This short-term course is mandatory for all prospective program applicants. See current class schedule for specific course meeting times. Although applications are accepted throughout the year, the Radiologic Technology program starts only in the fall semester of every school year.

In addition to the Allied Health 010 course the program has other prerequisites, which must be completed with grade "C" or better before program entry. Students with prior Radiologic Technology training or experience may be eligible for a waiver of Allied Health 010 and/or advanced program standing.

The Radiologic Technology program is a full-time (two years including one summer session) program. Successful program completion requires the following: **1)** completion of all required Radiologic Technology courses as outlined in catalog, **2)** completion of approximately 1850 clinical hours, and **3)** completion of all requirements for Associate in Science degree as required by Orange Coast College. These specific program completion requirements must be satisfied within the two-year time frame of the Radiologic Technology program. Eligibility for the post program state and registry examinations is dependent upon meeting these requirements. It is highly recommended that the program applicant first complete all units of the General Education requirement before program entry. This program requires the student to participate in clinical experience concurrent with classroom courses. Clinical responsibilities will be arranged by the Radiologic Technology faculty and will include evening and/or weekend assignments. The student receives no salary for this clinical experience but will receive course credit toward program completion.

Radiologic Technology is a rapidly expanding allied health profession offering excellent job opportunities.

Employment possibilities include:

- Hospitals
- Imaging Centers
- Private Offices
- Medical Clinics
- Industry
- Sales

ASSOCIATE DEGREE PROGRAM

This is an Associate of Science Degree program, all students will be required to complete the Orange Coast College Graduation Requirements for the AS Degree including General Education Options 1, 2, or 3.

SECOND YEAR

FALL

Digital Imaging & Computer Applications	Rad T	265	(2)
Rad Positioning/Critique 3	Rad T	270	(3)
Clinical Lab 5	Rad T	271	(10.5)

INTERSESSION

Clinical Lab 6	Rad T	276	(2)
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SPRING

Advanced Patient Care	Rad T	216	(2)
Rad Positioning/Critique 4	Rad T	275	(3)
Clinical Lab 7	Rad T	277	(6)
ARRT Board Prep	Rad T	285	(1)
Applied Physics & Fluoroscopy	Rad T	290	(2.5)

Program prerequisite:
High School graduate, G.E. D., or California Proficiency Exam.

Preliminary group of courses which must be taken prior to enrollment in the major course sequence as outlined in "B":

Health Occupations	Al H	010	(.5)
Medical Terminology	Al H	111	(3)
Anatomy-Physiology	Biol	221	(4)
Radiologic Physics	Rad T	100	(2)

Subtotal: (9.5)

Students are required to earn a grade "C" or better in all courses

B. Required courses for this major:

Course

FIRST YEAR

FALL Units

Patient Care	Al H	115	(2.5)
Rad. and Imaging Safety	Rad T	105	(1)
Beg. Radiologic Practice	Rad T	165	(1.5)
Rad Positioning Critique	Rad T	170	(3)
Clinical Lab 1	Rad T	171	(2)
Radiographic Imaging	Rad T	180	(3)

INTERSESSION

Clinical Lab 2	Rad T	172	(2)
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SPRING

Rad Positioning/Critique 2	Rad T	175	(3)
Radiographic Pathology	Rad T	185	(1)
Clinical Lab 3	Rad T	176	(7)
Human Diseases	Al H	120	(2)

SUMMER

Clinical Lab 4	Rad T	177	(4.5)
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Total: (73.5)

Suggested elective

Ethics	Phi	120	(3)
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COURSE DESCRIPTIONS

RAD T 100 - Radologic Physics

The fundamentals of radiation and radiological physics. Operation of medical radiographic X-ray units. Study of the effects of radiation in humans. Introduction to health-physics instrumentation

RAD T 105 - Radiation and Imaging Safety

A study of the effects of radiation in humans and the principles of protection as applied to radiography. Introduction to health-physics instrumentation with a study of radiation control regulations.

RAD T 165 - Beginning Radiologic Practice

Introduction to the radiology environment emphasizing professionalism, a humanistic approach to patients, medical/radiology records responsibilities, and medical/legal principles. Student obligations to clinical education are identified.

RAD T 170 - Radiographic Positioning and Critique 1

Introduction to radiographic positioning principles, study of contrast media, acquaintance with x-ray apparatus, laboratory practice and film critique of chest, abdominal studies, and upper extremities.

RAD T 171 - Clinical Lab 1

Clinical experience in an affiliated radiology department under the supervision of certified radiology and health care personnel. Radiographic skills in chest and abdomen procedures will be emphasized.

RAD T 172 - Clinical Lab 2

Clinical experience in a radiology department of an affiliated training site with supervision of certificated radiology and health care personnel utilizing a condensed format. Radiographic skills to include assisting with routine contrast media studies of the GI and GU tracts..

RAD T 175 - Rad Positioning and Critique 2

Radiographic positioning principles, laboratory practice, and film critique of the lower extremities, vertebral column, and basic skull. Overview of common pathologies of identified areas.

RAD T 176 - Clinical Lab 3

Clinical experience in an affiliated radiology department under the supervision of certified radiology and health care personnel. Radiographic skills to be emphasized will be fluoroscopic procedures, GU tract, upper and lower extremities, and routine spinal column.

RAD T 177 - Clinical Lab 4

Clinical experience in an affiliated radiology department under the supervision of certificated radiology and health care personnel. Radiographic skills to be emphasized will be routine skull radiography, portable radiography, minor special procedures, and introduction to pediatric and trauma radiography.

RAD T 180 - Radiographic Imaging

Introduction to radiologic technology, radiographic image formation; principles of exposure technique and essentials of radiographic quality.

RAD T 185 - Radiographic Pathology

Advanced study, identification, and critique of common radiographic pathologies in major body systems. This study assists the learner in providing quality patient care.

RAD T 216 - Advanced Patient Care

Multi-skill preparation for the Radiologic Technology student including management communication skills; Venipuncture, with injection of contrast media; basic electrocardiography; and the business of radiology. Three hours lecture, three hours laboratory

RAD T 265 - Digital Imaging & Computer Applications

Introduction to digital imaging, CT and MRI and computer systems as utilized in radiology departments. Overview of digital and analog devices with emphasis on computers and required peripheral equipment. Basic imaging principles as applied to computerized tomography and magnetic resonance to include physics, imaging protocols, R/F electronics and gradient coil design and use. Software and display strategies for each modality will be discussed. Course does not include clinical experience.

RAD T 270 - Rad Positioning and Critique 3

Radiographic positioning, film critique of advanced skull to include sinuses, TMJ's, mastoids, mandible, facial bones, bony thorax and pelvic girdle. Introduction to ancillary imaging modalities including sectional anatomy.

RAD T 271 - Clinical Lab 5

Clinical experience in an affiliated radiology department under the supervision of certified radiology and health care personnel. Emphasis on independent radiography and decision making. Cranial studies and torso exams will be emphasized.

RAD T 275 - Rad Positioning and Critique 4

Introduction to advanced imaging principles and procedures to include diagnostic specials, interventional angiography, CT and MR. Sectional anatomy as related to these imaging procedures will be discussed. Principles of mammographic imaging per California State (RHB) regulations. Introduction to quality assurance principles and techniques. Elements of professional development.

RAD T 276 - Clinical Lab 6

Clinical experience in an affiliated radiology department under the supervision of certified radiology and health care personnel. Emphasis is on independent radiography and decision making. Professional growth and exit skills are expected.

RAD T 277 - Clinical Lab 7

Final capstone - Clinical experience in an affiliated radiology department under the supervision of certified radiology and health care personnel. Emphasis on independent radiography and decision making. Professional growth and program exit skills expected.

RAD T 285 - CRT/ARRT Board Preparation

Comprehensive categorical review of diagnostic radiologic technology in preparation for state and national certification boards.

RAD T 290 - Applied Physics & Fluoroscopy

Applied principles of physics to current radiographic equipment including fluoroscopy, image viewing, and recording systems, and tomography. Study of knowledge and skills required to qualify student for fluoroscopy component of state licensure exam. Review of imaging concepts, x-ray beam quantity and quality, and radiation protection.

CLINICAL AFFILIATES

FACILITY

Orange Coast Memorial Med. Center

9920 Talbert Avenue, Fountain Valley, CA 92692
(714) 378-7571

Children's Hospital Orange
County
1201 W. La Veta Avenue, Orange, CA 92868
(714) 800-3737 Ext: 19085

Huntington Beach Med. Center
17772 Beach Blvd., Huntington Beach, CA 92647
(714) 843-5035

West Anaheim Medical Center
3033 W. Orange Avenue, Anaheim, CA 92804
(714) 229-4060

Mission Hospital Reg. Med. Center
27700 Medical Center Rd., Mission Viejo, CA
92675
(949) 364-1400 x 7625

St. Joseph's Hospital
1100 W. Stewart Dr, Orange, CA 92668
(714) 771-8142

UCI Medical Center
101 City Drive South, Orange, CA 92668
(714) 456-5513

Orange County Global
1001 N. Tustin Avenue, Santa Ana, CA 92705
(714) 953-3500 x3390

West Coast Radiology Center
1100 A N. Tustin Ave., Santa Ana, CA 92705
(714) 835-6055

Kaiser Permanente – Irvine
6640 Alton Parkway, Irvine, CA
(949) 932-7146

CLINICAL EDUCATOR

Wes Biggerstaff

Nadia Casarrubius Garcia

Mojgan Etaati/ Robert Cox

Candace Maciel

Jessica Nazzario

Del Lipiz

Wendell Mercene/Henry Nguyen

Mary Beth Walker

Charlie Tran

Richard Ang

CLINICAL EDUCATION POLICIES AND PROCEDURES

I. Philosophy

The clinical phase of the Rad Tech program is considered to be the cornerstone for the acquisition of technical knowledge and skills. It is here the student will have the opportunity to learn the "Art and Science" of radiography with its real world applications.

The Radiologic Technology faculty will expect the students to perform all duties and responsibilities during the clinical training to the best of their ability and with professional demeanor. Clinical education is considered a college course that meets off-campus at a specific location and time frame. The student is expected to adhere to the published class schedule. Any variation in clinical training schedule must be submitted in writing and approved by the clinical educator. Disciplinary action will be taken against any student who violates this policy. The student receives no salary for this clinical training but will receive course credit towards completion of the Rad Tech program. Location of clinical assignments will be arranged by the Rad Tech faculty. The arranged clinical hours (see description of required clinical education hours) will be determined by the clinical educator at the student's clinical education center.

II. Evaluation

During the course of the clinical training, the student will be expected to gain "hands on" experience and technical skill in performing radiographic procedures. Evaluation of the student's clinical ability will be done on a periodic basis by the clinical educator, radiology staff, and program faculty. During each clinical semester, the student will have two formal evaluations: 1) mid-semester and 2) end of semester. These formal evaluations will be completed by the clinical educator with assistance from the Radiologic Technology staff. The purpose of these evaluations is: 1) to assess student's technical ability and document their progress and 2) to determine the clinical grade for that given clinical course.

Evaluations will be done on an individual basis and will be shared with each student. In addition to the semester evaluations, the student will be required to satisfactorily complete two competency lists. The first list is due at the **end of the 1st year** of training and will determine the student's eligibility to progress into the 2nd year phase of the program. The second list is due at the **end of the 2nd year of training** and will determine the student's eligibility for successful program completion. Since these competency lists are program requirements, no student will be allowed to complete the program without these competencies. If the student fails to complete the program competencies, the ARRT required competencies, and the state Fluoroscopy requirements within the program's normal 2-year time frame, **the clinical training phase will be extended.**

Students will also be given the opportunity to evaluate their clinical education centers and the Rad Tech program. Student anonymity will be adhered to.

III. Clinical Documentation and Paperwork

STUDENT RECORD SECURITY:

In order to comply with The Family Educational Rights and Privacy Act (FERPA) and Health Insurance Portability and Accountability Act (HIPAA) students' educational records and health records must be kept secure and only accessible by program faculty with legitimate educational interest or in cases of medical emergency.

The following items must be kept in a secure location at the clinical site that can only be accessed by program faculty.

1. Student Clinical Profile form
2. Copies of the student background check card and photo ID card
3. All Performance Evaluations until the end of the term. At the end of each academic term performance evaluations will be returned to the individual student, added to the clinical grade packet, submitted to campus program faculty and filed in a secure location on campus.

All aspects of the student's clinical educational experience must be documented as required by the Department of Public Health and JRCERT (Joint Review Committee) as part of the program's accreditation. Students will be required to maintain complete and up-to-date records verifying their clinical training. Documentation is required for the following:

- 1) clinical hours worked
- 2) types and numbers of radiographic procedures performed

A separate section of this manual contains the required forms needed for such documentation. The student's responsibility will be to complete these forms as needed during the clinical phase of their training. Required forms will be kept at the student's clinical site at all times. They are not to be taken home. At the end of each clinical course, the student will submit the required forms during the clinical final exam. Date and campus location will be announced.

Failure to comply with required clinical documentation and paperwork completion will result in **an unsatisfactory grade** for that clinical course. The student is expected to maintain all records up-to-date and will be graded down accordingly if this standard is not maintained.

All clinical forms and documentation will become a part of the student's permanent record and will be filed in an appropriate location on campus.

IV. Clinical Training Policies

A. Clinical Assignment

Students will begin the clinical training phase of the program in the ninth week of the Fall semester 1st year. **Clinical assignments are determined by the Rad Tech faculty**. This assignment will be for the first year of training. At the beginning of the 2nd year, the student will be given a new assignment at a different clinical education center. This

rotational concept supports the Rad Tech program's philosophy of providing the student with well-rounded educational experiences.

If during the course of the clinical training, a student experiences difficulties, a formal conference will be held. Reassignment to a different clinical site could be an option per decision of the Rad Tech faculty. If however, a student is dismissed from clinical or classroom for cause, the result will be total program dismissal. Dismissal from the clinical phase of the program will occur when the student receives more than two(2) critical incident reports in any clinical course. (See Pages 40 and 41.)

During clinical training the student should refrain from using a cell phone or other electronic device approved by their clinical instructor.

B. Attendance

1) Beginning in Rad T 172 the student is allowed at least one absence per clinical course; four (4) week courses will be allowed one absence while eight (8) and sixteen (16) courses will be allowed two (2). Any absence beyond the allowed number will be required to be made up; ideally in the rotation missed when the absence occurred. If the rotation is not available a similar rotation should be selected. In order to promote professional behaviors students are encouraged to request necessary days off in advance whenever possible.

All make-up time must be scheduled in writing with approval by the clinical educator and clinical coordinator before the make-up is allowed. Failure to do this will result in no insurance coverage during this make-up assignment (see page 22-23 for insurance information) and the make-up assignment **WILL** be deemed in-valid by program faculty to count toward the time missed. To receive a clinical grade, all make-up time must be completed **before** the end of that clinical course. **When possible make-up time will be in the rotation missed.**

In the event a student is unable to report for his/her clinical assignment the student must notify the clinical educator and/or the supervisor on duty at their clinical education center and the clinical coordinator no later than **30 minutes** prior to the start of their assignment except in the event of an unforeseen emergency. In the event of an emergency the student or a member of the student's family should contact the clinical education center and program faculty as soon as possible.

2) Students who report for clinical assignment after their scheduled starting time will be considered **Tardy**. In the event a student will be tardy for the start of their clinical assignment the student must notify the clinical educator and/or the supervisor on duty at their clinical education center no later than **30 minutes** prior to the start of their assignment except in the event of an unforeseen emergency. In the event of an emergency the student or a member of the student's family should contact the clinical education center and program faculty as soon as possible.

All tardies must be made up. The scheduling of the make-up time missed due to being tardy shall be determined by the clinical educator. If a student is tardy three times within a given clinical course, a written warning will be issued. If two additional tardies occur, a critical incident will result.

3) Students who do not report for clinical assessment nor contact the clinical faculty regarding their absence will be issued a critical incident report.

4) Students who do not contact the clinical education center at least 30 minutes before the start of their assignment if they are to be late or absent will be given a written warning. Two (2) written warnings for this offense will result in a critical incident.

5) If a student stays beyond their assigned hours to complete a procedure such additional hours will be noted on the student's time sheet. Should a student decide, on his own to remain on duty, no additional time accrued will be noted.

6) With the exception of perfect clinical attendance, students will be expected to adhere to the published class schedule for clinical hours and duration.

C. Required Clinical Education Hours

The Radiologic Technology faculty will assign you to your clinical education site prior to the beginning of RT 171 and RT 271. The clinical educator at your assigned site will be responsible for your daily clinical schedule.

Any variation in the clinical schedule must be submitted in writing (use green form) and approved by your clinical educator and the submitted to the clinical coordinator. The approval must be given before the student can change his schedule. Failure to do so will result in a critical incident to be filed. Students will be allowed to request **one schedule change for a 4 to 8 week course and two for 16 week courses.** Schedule change requests must be made at least 1 week prior to date.

Normally, a student **should not** be requesting any variation in the established clinical schedule. Clinical training is considered a college course with specific class hours, scheduled at an off-campus location. Changing the course schedule is not the student's prerogative. Each clinical course has a specific hour requirement that must be met for satisfactory course completion. If the student fails to complete the required hours an unsatisfactory grade will be issued. Any deviation from this policy must have specific Program Director approval.

D. Clinical Continuance

Should a clinical site choose to end their clinical affiliation with the college prior to a student finishing their clinical education, the affected student(s) will be placed at another clinical site in order to finish the required clinical requirements.

First year of the program

CLINICAL 1	RT 171	2 days/wk (Mon & Wed) for 8 weeks (8 hour day) starting approximately mid October.
CLINICAL 2	RT 172	32 hrs. arranged for 4 weeks during Intersession (8 hour day).
CLINICAL 3	RT 176	3 days/wk (Tues, Thurs, Fri) for 16 weeks (8 hour day).
CLINICAL 4	RT 177	4 days/wk arranged, for 8 weeks (8 hour day). Will include evening assignments (after 7 PM) and 2 weekend assignment.

Second year of the program

CLINICAL 5	RT 271	4 days/wk. (Tues., Thurs., Fri. and one 8 hour day to be arranged either Saturday or Sunday
CLINICAL 6	RT 276	32 hrs. arranged for 4 weeks (8 hour day) and will include 2 weekend/evening.
CLINICAL 7	RT 277	3 days/wk; Mon., Wed. & either Saturday or Sunday unless attending an optional rotation or exempt rotation, for 16 weeks (8 hour day). Could include an evening assignment.

*All arranged days will be at the direction of the clinical educator. Students **ARE PROHIBITED** from attending a clinical assignment on any recognized school holiday. Final exams week is appropriate time period for required make-up time.

1850 hours of clinical experience is required to meet California standards and satisfactory completion of Orange Coast College program

NOTE: A satisfactory clinical grade and evaluation must be granted before continuing to the next clinical course. **Program dismissal will result** if a student receives an overall clinical course grade and/or any one section of the clinical objectives is lower than a “B” or at minimum earning lower than 80% of the possible points.

D. Dress Code

As a professional, the Rad Tech student is expected to present a well-groomed appearance. Students in uniform are expected to demonstrate their professionalism at **all times** by:

1. Clean and pressed attire, clean and polished shoes
2. Clean hands and fingernails. Nails must **not exceed** 1/4 inch past fingertips. Only solid color, non-fluorescent nail polish (chipped polish must be removed). Artificial nail enhancements **are not permitted**, including but not limited to: artificial nails, acrylics, appliquéés, gels, tips, wraps. These requirements complied with TJC/CDC recommendations
3. Neat and clean hairstyles are required.
 - Beards, sideburns, and mustaches must be well-trimmed and clean
 - Hair that touches the collar must be pulled back and off the collar
4. Appropriate jewelry in keeping with professional standards. Body jewelry is discouraged and **must comply** with assigned clinical site policies.
5. Tattoos/body adornments must be fully covered by a student’s clinical uniform.

Uniform - A **dark blue** uniform top and bottoms are required. The top must have the Program logo embroidered on it, no exceptions. The Program will provide the embroidery; the student will supply the uniform. Shoes must be mostly white or black shoes (no cloth tennis shoes). An OCC student ID badge is required at all times. A current dosimeter badge is required at all times.

- * The wearing of surgical scrub clothes is only **permitted during** surgery and special procedures clinical assignments. The unauthorized wearing of scrub clothes or uniforms without embroidery during any clinical assignment will result in **violation** of the program dress code and will result in disciplinary action.
- ** Failure to comply with these established standards can result in dismissal from the clinical education site.
- *** Should you be assigned to a clinical education center whose dress code is more restrictive than the program standards as outlined above, you are expected to comply with their requirements.
- **** If a student reports to their clinical assignment **without name tag and/or current film badge or inappropriate attire**, they will be sent home. All time missed must be made up.

E. Standard Precautions Compliance

Students are to consistently observe standard precaution requirements during clinical assignment. Hand washing is the single most important means of preventing the spread of pathogens (as much as 90%). Hands must be washed at the start of daily clinical assignment, between patient contacts, before performing invasive procedures, after removing gloves at the completion of a task or when soiled by blood or body fluids and the end of the clinical day. Additionally radiographic equipment must be clean using appropriate cleaning solution and in compliance with department protocols. Adherence to these requirements is for the protection of both the patient and the student.

F. Student Grievance Policy

Should a student have a Grade Grievance they have one (1) year from the assignment of the grade to initiate a formal response (per College Policy). All other Grievances have to be initiated within one (1) month of the occurrence:

Step 1 - make appointment with clinical educator, faculty member and/or program director to discuss their Grievance. If no resolution with ten (10) days:

Step 2 - If unsatisfactory resolution, within ten (10) days make appointment with Division Dean, Consumer and Health Sciences, for further input. If no resolution with ten (10) days:

Step 3 - If unsatisfactory resolution, within ten (10) days make appointment with Dean of Students/College Grievance Officer for review and discussion of matters not resolved in the previous steps. A written complaint/grievance can be filed. This grievance must be responded to within twenty (20) working days. If no resolution

Step 4 - Appeal to College President.

The Radiologic Technology program adheres to the established student grievance procedures as outlined in the college catalog. Any matter involving the student and potential program dismissal will adhere to the concept of due process including a formal conference in which the student will be given opportunity to present his/her case. For JRCERT non-compliance issues the student can utilize the procedure outlined on page 24.

G. Clinical Supervision Policies:

During clinical assignment there are two types of supervision:

1. **Direct Supervision:**

Definition: a registered radiographer (with two (2) years post-grad experience) who:

- Is physically present in the room during the conduct of the procedure.
- Reviews the procedure in relation to the student's achievement
- Evaluates the condition of the patient in relation to the student's knowledge
- Reviews and approves the procedure and/or image.

2. **Indirect Supervision**

Definition: a registered radiographer is immediately available to assist the students regardless of the level of student achievement. "Immediately available" is interpreted as the physical presence of the radiographer adjacent to the room or location where a radiographic procedure is being performed. This availability applies to all areas where ionizing radiation equipment is in use on patients

Students must **perform all examinations under direct supervision** until they have successfully demonstrated competency status. Competency is verified by completing a **minimum of four** successful procedure evaluations of the same body area and having that exam signed off on a exam evaluation form. Once a student has passed a competency check-off, he/she may perform the examination under indirect supervision after the first 500 clinical hours have been completed.

Regardless of the level of supervision, the following will **always** apply:

- a. Prior to the start of any exam, the supervising radiographer will assess the student's ability to perform the procedure as well as the patient's condition. If conditions do not warrant the student performing the procedure, the student will then **assist** the radiographer. This exam **can NOT** be used as an evaluation.
- b. All repeat radiographs, for any reason, must be **directly supervised** by a registered radiographer physically present in the room. **All repeat films must be taken under direct supervision regardless of the student's performance level.** California Radiation Health and Safety Code and Program accreditation guidelines **do not** permit a student to perform any repeat exposures unless a registered radiographer is with them. **There are NO EXCEPTIONS.**
- c. **All repeat radiographs must be initialed on the student's daily clinical log by the technologist who supervised the repeat film.**
- d. All new procedures must be directly supervised.
- e. First 500 hours of training requires direct supervision. Once a student achieves competency status, general (indirect) supervision is permitted **except** for portable radiography as stated Section F.
- f. Portable radiography/fluoroscopy in specialized units (i.e. CCU, ICU) and surgery requires **direct supervision** regardless of student's supervision status. Non-specialized portable exams can be performed under indirect supervision once the student **has**

achieved competency status. According to JRCERT policy, this level of supervision **requires** the technologist to be in the **immediate location** to provide assistance if necessary.

- g. Fluoroscopy: Radiologic technology students shall not independently perform diagnostic fluoroscopic procedures, students may only operate the fluoroscopy unit under direct supervision. While performing fluoroscopy students are required to wear radiation protective apparel and a radiation monitoring device at the collar outside the apron.

G. Standards of Critical Incident:

The following are guidelines for when a critical incident should be issued. This is NOT an all encompassing list, but provides direction for when such a disciplinary action should be taken.

CRITICAL INCIDENT IN RADIOGRAPHY

- 1) Rarely produces good quality films and has unusually high repeat factor.
- 2) Has no more than one (1) occasion: x-rayed the wrong patient or body part resulting in excess radiation exposure to the patient.
- 3) Has no more than one (1) occasion: failed to use proper radiation protection practices and/or dose reduction techniques as indicated by Title 17 of the California/Radiation Safety Code and hospital policy.
- 4) Has no more than one (1) occasion: been abusive and/or destructive to equipment resulting in service repair beyond normal maintenance.

CRITICAL INCIDENT IN PATIENT CARE

- 1) Has on one (1) or more occasions jeopardized the safety of patients, visitors, co-workers or self by failing to observe established hospital safety rules and policies regarding procedures.
- 2) Has on one (1) or more occasions failed to maintain patient confidentiality as outlined by hospital policy.
- 3) Has on one (1) or more occasions failed to follow verbal and/or written instructions resulting in significant adverse effect to patient care.

CRITICAL INCIDENT IN COMMUNICATION

- 1) Has on two (2) or more occasions failed to communicate, cooperate and/or relate in a professional manner towards patients, visitors or staff in a manner consistent with hospital staff standards.

CRITICAL INCIDENT IN APPEARANCE

- 1) The student has on more than three (3) occasions violated Hospital/Orange Coast College dress code policies as outlined in the student clinical manual or hospital policies.

CRITICAL INCIDENT IN DEPENDABILITY

- 1) Tardiness (defined as in excess of 10 minutes) that occurs three times within a given clinical course will result in a **WRITTEN WARNING**. Two additional tardies within the same semester will result in a **CRITICAL INCIDENT**.

CRITICAL INCIDENT IN ATTENDANCE

- 1) One (1) **UNEXCUSED** absence in a clinical course will constitute a critical incident. **Unexcused absence is defined as an absence in which the student does not contact the clinical site nor comply with department policy regarding notification of clinical absence.**
- 2) Four (4) absences in a given clinical course would result in a critical incident **unless documented by physician's note or other documentation or emergency.**

Student Name (print please)

Student signature

Date

PROGRAM COMPLETION REQUIREMENTS

A. Early Program Release

Early program release will be a faculty decision, reviewed on an individual basis, contingent upon successful completion of the following:

- 1) all direct and indirect competencies
- 2) program required clinical hours
- 3) Rad Tech program courses
- 4) General Education requirements
- 5) ARRT core competencies

B. Conditions for Program Completion

The Rad Tech program is an associate degree program that requires the student to successfully complete **both** program requirements and general education requirements. The Radiologic Technology program requires program graduates to sit for the State fluoroscopy exam and ARRT Registry examination after successful program completion.

NO STUDENT WILL BE PERMITTED TO SIT FOR THE STATE EXAM AND/OR THE ARRT REGISTRY EXAM UNTIL BOTH OF THE ABOVE REQUIREMENTS HAVE BEEN MET. Eligibility for program completion is determined by the graduation office. If the student is declared ineligible for program completion, the student will not be able to sit for the required external exams until all deficiencies has been met.

To assess eligibility, each student will have a pre-graduation check completed in the spring semester of the first year. Any deficiencies noted at that time must be addressed and resolved by the **end of the 2nd year spring semester**. Failure to comply with this policy will result in the student being declared ineligible for program completion.

Upon satisfactory program completion and verification of such, the appropriate program documents will be released. The state CRT license will be sent directly to the student from the Department of Public Health (Radiologic Health Branch), **only after** verification from the American Registry of Radiologic Technologists (ARRT) that the registry exam has been passed. Program completion documents are available at the end of the final 2nd year semester only upon verification of successful completion of all required program **and** AS courses. The associate degree will be sent to the student from the graduation office at the college. Release of these documents will be done in a timely manner, however, verification of program completion must be completed before any document release. The student should realize that **not all** documents will be available on last program day. **A three to six week delay** could occur. Students are advised not to accept employment until they have received their ARRT **and** state CRT license. The Rad Tech program only has responsibility for verification of program completion. Final verification is the responsibility of the GRADUATION OFFICE.

Student Name (please print)

Student Signature

Date

CLINICAL EXPERIENCE TIME FRAMES

FIRST YEAR

RT 171 - 120 hours
CLINICAL Lab 1

8 weeks Mon & Wed
(starts the 9th week
(of the fall semester)

RT 172 – 128 hours
CLINICAL Lab 2

4 weeks / 32 hrs. arranged*
Intersession
(spring semester)

RT 176 – 376 hours
CLINICAL Lab 3

16 weeks
Tues, Thurs., & Fri.
(summer semester)

RT 177 – 256 hours
CLINICAL Lab 4

8 weeks / 32 hours per wk
arranged
(will include weekend and PM assignments)

SECOND YEAR

RT 271 - 512 hours
CLINICAL Lab 5

16 weeks
Tues, Thurs., Fri .
& 8 hrs. Saturday
or Sunday(fall semester)

RT 276 – 128 hours
CLINICAL Lab 6

4 weeks / 32 hours arranged
Intersession
(will include weekend)

RT 277 – 384 hours
CLINICAL Lab 7

16 weeks
Mon., Wed., &
Sat. or Sun.
(unless optional or
exempt rotation)

JUNE

1) Student scheduled
ARRT Exam
2) Upon ARRT verification of passing registry
exam, RHB (Calif.) will issue CRT license.**

Hours arranged are done by the clinical educator at the clinical site.

****Note:** Before ARRT certification or CRT license is sent, the program must verify successful program completion including AS degree.

******* The unit values assigned above are calculated using the Internship Academy formula as allowed by Title 5 of the Education Code.

****** Clinical hours will vary from 6:00 AM to 9:00 PM; Clinical sites will be less than 35 miles from campus**

CREDENTIALING

CREDENTIALING of health manpower takes four forms - **accreditation** of educational programs, **certification/registration** of personnel by the profession, and **licensure** by a government agency. The three aspects are closely interrelated. State practice acts, establishing the procedures for licensing, usually contain educational requirements. Professional associations, too, usually require that the applicant satisfy certain educational qualifications. For purposes of clarity, the following definitions are presented:

- * **Accreditation** - The process by which an agency or organization evaluates and recognizes an institution or program of study as meeting certain predetermined criteria or standards. Orange Coast College radiologic technology program is accredited by the Joint Review Committee on Education in Radiologic Technology and California Radiologic Health Branch.
- * **Licensure** - The process by which a **government agency** permission to persons to engage in a given profession or occupation by certifying that those licensed have attained the minimal degree of competency necessary to ensure that the public health, safety, and welfare will be reasonably well protected. All practicing technologists and physicians are licensed by the California Dept. of Public Health, Radiologic Health Branch.
- * **Certification** - The process by which a **nongovernmental agency or association** grants recognition to an individual who has met certain predetermined qualifications specified by that agency or association. Such qualifications may include: (a) graduation from an accredited or approved program; (b) acceptable performance on a qualifying examination or series of examinations; and/or completion of a given amount of work experience. Graduates of accredited schools may apply to the **American Registry of Radiologic Technologists** for the opportunity to sit for their examination. This organization is jointly sponsored by the American Society of Radiologic Technologists and The American College of Radiology. Upon passing the ARRT exam, a person is a certified radiologic technologist (RT-R).
- * **Registration** – This is the annual procedure **required by ARRT** to maintain initial certification. ARRT will continue to register the certification of individuals who meet the following three requirements: 1) agree to comply with the ARRT Rules and Regulations, 2) maintain the Standards of Ethics and, 3) meet the continuing education requirements of 24 hours in a two year cycle. **Only technologists who are registered** (renewed within the past year) may designate themselves as ARRT Registered Technologists and use the initials “RT” after their name.

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Successful A.R.R.T. applicants may apply for membership in The American Society of Radiologic Technologists (ASRT) and The California Society of Radiologic Technologists (CSRT). The true professional is a member of both.

APPLICATION PROCESS FOR POST PROGRAM EXAMS

Upon successful program completion, the student is eligible for the following:

1. **CRT** – Certified radiologic technologist. Certificate issued by Radiologic Health Branch (RHB), Sacramento
2. **Fluoroscopy** – specialized permit only recognized by California. Issued by RHB.
3. **ARRT(R)** – National registration exam given by American Registry of Radiologic Technologists, Minnesota

The requirements for CRT and ARRT are:

1. Submit completed ARRT application signed by Program Director along with necessary fee, **prior** to program completion date. Completed application/fees **must be sent directly** to the ARRT.
2. Eligible applicant schedules ARRT exam date as directed by the ARRT. (the ARRT registry is a computer based exam). Test date, time and location is scheduled at the convenience of the student however, the ARRT **cannot be taken until all program requirements including clinical hours and AS degree have been completed**. The student has a 90-day window from program completion date within which to take the ARRT.
3. The ARRT will notify the student of their score. The student will then need to send a copy of the ARRT and CRT application to the RHB. RHB will **mail directly** to the graduate the CRT license.
4. Upon receipt of **both** ARRT and CRT, the graduate can now legally begin work as a Diagnostic Radiographer.

The requirements for the state fluoroscopy permit are:

1. Submit completed application, fee, and copy of their ARRT certification directly to RHB.
2. The student will then receive a notification of their test window directly from the ARRT. The student will then schedule their test date.
3. The ARRT will notify the RHB of the test result and the RHB will then send the Fluoroscopy Permit to the student.

Note: 1. Before any exam results are released, the Program Director must sign verification of student's satisfactory completion of all program requirements. The Program Director must also sign exam applications as verification of achievement by each student.

2. Eligibility to set for the above noted post-program examinations and issuance of said certifications and licensure is not the responsibility of the Program. The graduating student must meet the eligibility requirements set forth by the responsible entity.

Student Name (please print)

Student Signature

Date

NOTE: At the end of each academic year the Program will submit an Approved School Students Report for both Radiologic Technology and Fluoroscopy to the CDPH-RHB as directed in CCR, title 17, section 30435.

OUTCOMES ASSESSMENT

Accreditation requires that the Program maintain a policy of constant outcomes assessment. This is achieved through a variety of means. You the student participate in outcomes assessment through surveys and other data collection mechanisms. At the end of each semester you will complete several on-line surveys. There will be surveys for each didactic class you enroll in; including those with labs. Additionally, you will complete a survey about your clinical education and experiences. The web address for the surveys will be provided in class.

Each survey has a unique password that accesses the correct survey, so it is important that you use the correct survey for each course/class and clinical evaluation. These will be provided at the appropriate times.

During your first year spring, second year fall, and second year spring semesters you will complete a Mid-Semester Evaluation. These can be found on the following pages.

At the completion of the Program, you will need to complete the Graduate Exit Survey and return it with your clinical paperwork. This survey is at the end of this section.

In the Spring, after graduation, you will be asked to complete a 9 Month Follow-up Survey. This survey assesses the graduates opinions about the Program after they have been employed. You will be notified by postcard when the survey is available. The postcard will contain the web address for accessing the survey.

The web address for the nine month follow-up survey will be emailed and snail mailed to you at the appropriate time.

Should you have any questions regarding Outcomes Assessment fell free to talk the faculty about them.

MID-SEMESTER EVALUATION – RT 176

Directions: In narrative form, please comment on student’s mid-semester clinical performance in the following areas:

- 1) Technical Skills –

- 2) Attitude and Professional Behavior –

- 3) Attendance and Dependability –

- 4) Professional Appearance –

Identify student’s strengths observed:

Identify student’s weaknesses observed:

List specific goals the student should achieve for the remaining eight weeks of the semester:

- 1.

- 2.

- 3.

Based upon the above comments and observation of student’s clinical performance, the mid-semester clinical grade is _____. If grade is lower than a “B”, student must return form to campus and schedule conference with program staff.

This written clinical assessment should be shared with the student and placed into the student clinical notebook. Signatures below signify that this has been completed.

Clinical Educator’s Signature

Date

Student’s Signature

Date

Student’s Comments: _____

(SELF)
MID SEMESTER EVALUATION – RT 176

Directions: In narrative form, the student is to comment on their mid-semester clinical performance in the following areas:

- 1) Technical Skills –
- 2) Attitude and Professional Behavior –
- 3) Attendance and Dependability –
- 4) Professional Appearance –

Identify student's strengths observed:

Identify student's weaknesses observed:

List specific goals the student should achieve for the remaining eight weeks of the semester:

- 1.
- 2.
- 3.

Based upon the above comments and observation of student's clinical performance, the mid-semester clinical grade is _____. If grade is lower than a "B", student must return form to campus and schedule conference with program staff.

This written clinical assessment should be shared with the clinical educator and placed into the student clinical notebook. Signatures below signify that this has been completed.

Clinical Educator's Signature

Date

Student's Signature

Date

Student's Comments: _____

MID SEMESTER EVALUATION – RT 271

Directions: In narrative form, please comment on student’s mid-semester clinical performance in the following areas:

- 1) Technical Skills –
- 2) Attitude and Professional Behavior –
- 3) Attendance and Dependability –
- 4) Professional Appearance –

Identify student’s strengths observed:

Identify student’s weaknesses observed:

List specific goals the student should achieve for the remaining eight weeks of the semester:

- 1.
- 2.
- 3.

Based upon the above comments and observation of student’s clinical performance, the mid-semester clinical grade is _____. If grade is lower than a “B”, student must return form to campus and schedule conference with program staff.

This written clinical assessment should be shared with the student and placed into the student clinical notebook. Signatures below signify that this has been completed.

Clinical Educator’s Signature

Date

Student’s Signature

Date

Student’s Comments: _____

(SELF)
MID SEMESTER EVALUATION – RT 271

Directions: In narrative form, the student is to comment on their mid-semester clinical performance in the following areas:

- 1) Technical Skills –

- 2) Attitude and Professional Behavior –

- 3) Attendance and Dependability –

- 4) Professional Appearance –

Identify student's strengths observed:

Identify student's weaknesses observed:

List specific goals the student should achieve for the remaining nine weeks of the semester:

- 1.

- 2.

- 3.

Based upon the above comments and observation of student's clinical performance, the mid-semester clinical grade is_____. If grade is lower than a "B", student must return form to campus and schedule conference with program staff.

This written clinical assessment should be shared with the clinical educator and placed into the student clinical notebook. Signatures below signify that this has been completed.

Clinical Educator's Signature

Date

Student's Signature

Date

Student's Comments: _____

MID SEMESTER EVALUATION – RT 277

Directions: In narrative form, please comment on student’s mid-semester clinical performance in the following area:

- 1) Technical Skills -
- 2) Attitude and Professional Behavior –
- 3) Attendance and Dependability –
- 4) Professional Appearance –

Identify student’s strengths observed:

Identify student’s weaknesses observed:

List specific goals the student should achieve for the remaining eight weeks of the semester:

- 1.
- 2.
- 3.

Based upon the above comments and observation of student’s clinical performance, the mid-semester clinical grade is _____. If grade is lower than a “B”, student must return form to campus and schedule conference with program staff.

This written clinical assessment should be shared with the student and placed into the student clinical notebook. Signatures below signify that this has been completed.

Clinical Educator’s Signature

Date

Student’s Signature

Date

Student’s Comments: _____

(SELF)
MID SEMESTER EVALUATION – RT 277

Directions: In narrative form, the student is to comment on their mid-semester clinical performance in the following areas:

- 1) Technical Skills -

- 2) Attitude and Professional Behavior –

- 3) Attendance and Dependability –

- 4) Professional Appearance –

Identify student’s strengths observed:

Identify student’s weaknesses observed:

List specific goals the student should achieve for the remaining eight weeks of the semester:

- 1.

- 2.

- 3.

Based upon the above comments and observation of student’s clinical performance, the mid-semester clinical grade is _____. If grade is lower than a “B”, student must return form to campus and schedule conference with program staff.

This written clinical assessment should be shared with the clinical educator and placed into the student clinical notebook. Signatures below signify that this has been completed.

Clinical Educator’s Signature

Date

Student’s Signature

Date

Student’s Comments: _____

**ORANGE COAST COLLEGE
RADIOLOGIC TECHNOLOGY PROGRAM
2701 Fairview Road
COSTA MESA, CA 92628-5005**

GRADUATE EXIT SURVEY

Date of Graduation: _____

The purpose of this graduate exit survey is to assess the program's effectiveness in meeting our standards and goals by soliciting graduate's input.

Please answer the following questions about the program. The information provided will assist the faculty in determining how well the program has met your needs. All information will be kept confidential.

The Rad Tech faculty wish you much success as you pursue your career!

1. Has the program adequately prepared you with the skills and knowledge to perform as a radiographer?

2. What specific Rad Tech courses do you think were successful in assisting you with your career goals?

3. What specific Rad Tech courses do you think need to be changed? Identify what changes should be made.

4. On a scale of 1 to 5 (five is best), rate your clinical educator: 1st yr: 2nd yr:

5. Are any specific changes needed for clinical education experience?

6. Have you been offered employment? If yes, where?

7. Are you contemplating advanced training or education? Please identify specifics.

8. What suggestions do you have for program improvement?

MONTHLY ATTENDANCE RECORD

In order for you to complete the Radiologic Technology program, it is **required** that you document the number of hours in the clinical phase of your training. The attendance procedure is listed below.

1. A time sheets for each semester is provided for your entire clinical experience. At the beginning of each semester, remove one from the manual and place it in your clinical binder.
2. Fill in your name, your clinical site, and year on each subsequent sheet.
3. Each time you report for duty, enter the date, time of arrival and your rotation in the appropriate spaces.
4. Report directly to the supervisor for your specific work assignment. Although these are posted at least monthly, they are subject to change as the workload changes.
5. Sign out only at the end of your assignment and have the clinical educator initial your time sheet. Failure to sign in and out will result in being **marked absent** for that clinical day.
6. If you are unable to report for duty for reasons of illness or emergency, you are required to call in at least 30 minutes before the start of your assignment. Arrange for make-up duty with the clinical educator. **All make-up time must be in writing.** Make-up days must be completed before semester end.
7. If a student voluntarily chooses to exceed the 32 hr/wk requirement, this **must be stated in writing** when requesting clinical make-up assignments.
8. Any variation in your clinical schedule must be **submitted in writing** and approved by the clinical educator and clinical coordinator **before** the schedule change can occur.
9. Excessive absences (four or more) will constitute a critical incident report and additional unexcused absences could result in program dismissal. (This does not apply to documented illness or emergency situations.) Should this occur, students may pursue the grievance process as stated in the college catalog.
10. At the end of each week, total the number of hours.
11. The clinical educator is responsible for verifying the hours and makes an evaluation of your progress.
12. At semester's end, the entire semester's records are transported to the college as a permanent file. This action is conducted at the clinical final examination period.
13. Failure to follow the above policy will result in a critical incident to be filed.
14. Attendance records are considered the permanent documentation of the number of clinical hours you have completed. Falsifying these records is grounds for **automatic dismissal** from the Radiologic Technology program.

MASTER TIME SHEET
RADIOLOGIC TECHNOLOGY STUDENT
First Year
Orange Coast College – Class of

NAME _____

		Clinical hours	Accumulated course hours	Required Course Hrs.	Date	Signature Hospital Coordinator	Absences	Tardies
Rad T 171	First 8 weeks							
	Total			128				

		Clinical hours	Accumulated course hours	Required Course Hrs.	Date	Signature Hospital Coordinator	Absences	Tardies
RT 172	INTERSESSION			128				

		Clinical hours	Accumulated course hours	Required Course Hrs.	Date	Signature Hospital Coordinator	Absences	Tardies
Rad T 176	First 8 weeks							
	Second 8 weeks							
	Total			384				

		Clinical hours	Accumulated course hours	Required Course Hrs.	Date	Signature Hospital Coordinator	Absences	Tardies
Rad T 177	First 8 weeks							
	Total			256				

RT 171 HRS	RT 172 HRS	RT 176 HRS	RT 177 HRS	TOTAL CLINICAL HOURS

Date _____ Comments: _____

ORANGE COAST COLLEGE RADIOLOGIC TECHNOLOGY

CLINICAL ATTENDANCE SHEET RT 171

CLINICAL AFFILIATE: _____

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON				
WED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 1				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON				
WED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 4				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON				
WED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 7				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON				
WED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 2				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON				
WED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 5				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON				
WED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 8				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON				
WED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 3				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON				
WED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 6				

Week 1 - 8 Total Hours _____

Student Name: _____

Clinical Instructor Signature: _____

Student Signature: _____

ORANGE COAST COLLEGE RADIOLOGIC TECHNOLOGY PROGRAM

CLINICAL ATTENDANCE SHEET RT 172 or RT 276

CLINICAL AFFILIATE: _____

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON				
TUES				
WED				
THURS				
FRI				
SAT				
SUN				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS WEEK 1				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON				
TUES				
WED				
THURS				
FRI				
SAT				
SUN				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS WEEK 2				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON				
TUES				
WED				
THURS				
FRI				
SAT				
SUN				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS WEEK 3				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON			8	
TUES				
WED				
THURS			8	
FRI				
SAT				
SUN				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS WEEK 4				

Week 1 - 4 Total Hours _____

Student Name: _____

Clinical Instructor Signature: _____

Student Signature: _____

ORANGE COAST COLLEGE RADIOLOGIC TECHNOLOGY PROGRAM

CLINICAL ATTENDANCE SHEET RT 176

CLINICAL AFFILIATE: _____

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
TUES				
THURS				
FRI				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 1				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
TUES				
THURS				
FRI				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 4				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
TUES				
THURS				
FRI				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 7				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
TUES				
THURS				
FRI				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 2				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
TUES				
THURS				
FRI				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 5				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
TUES				
THURS				
FRI				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 8				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
TUES				
THURS				
FRI			8	
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 3				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
TUES				
THURS				
FRI				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 6				

Week 1 - 8 Total Hours _____

Student Name: _____

Clinical Instructor Signature: _____

Student Signature: _____

ORANGE COAST COLLEGE RADIOLOGIC TECHNOLOGY PROGRAM

CLINICAL ATTENDANCE SHEET

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
TUES				
THURS				
FRI				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 9				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
TUES				
THURS				
FRI				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 10				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
TUES				
THURS				
FRI				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 11				

CLINICAL AFFILIATE:

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
TUES				
THURS				
FRI				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 12				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
TUES				
THURS				
FRI				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 13				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
TUES				
THURS				
FRI				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 14				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
TUES				
THURS				
FRI				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 15				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
TUES				
THURS				
FRI				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 16				

Total Hours For Semester _____

Student Name: _____

Clinical Instructor Signature: _____

Student Signature: _____

ORANGE COAST COLLEGE RADIOLOGIC TECHNOLOGY PROGRAM

CLINICAL ATTENDANCE SHEET RT 177

CLINICAL AFFILIATE: _____

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON				
TUES				
WED				
THURS				
FRI				
SAT				
SUN				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 1				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON				
TUES				
WED				
THURS				
FRI				
SAT				
SUN				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 4				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON				
TUES				
WED				
THURS				
FRI				
SAT				
SUN				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 7				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON				
TUES				
WED				
THURS				
FRI				
SAT				
SUN				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 2				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON				
TUES				
WED				
THURS				
FRI				
SAT				
SUN				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 5				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON				
TUES				
WED				
THURS				
FRI				
SAT				
SUN				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 8				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON				
TUES				
WED				
THURS				
FRI				
SAT				
SUN				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 3				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON				
TUES				
WED				
THURS				
FRI				
SAT				
SUN				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 6				

Week 1 - 8 Total Hours _____

Student Name: _____

Clinical Instructor Signature: _____

Student Signature: _____

ORANGE COAST COLLEGE RADIOLOGIC TECHNOLOGY PROGRAM

CLINICAL ATTENDANCE SHEET RT 271

CLINICAL AFFILIATE: _____

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
TUES				
THURS				
FRI				
ARRANGED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 1				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
TUES				
THURS				
FRI				
ARRANGED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 4				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
TUES				
THURS				
FRI				
ARRANGED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 7				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
TUES				
THURS				
FRI				
ARRANGED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 2				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
TUES				
THURS				
FRI				
ARRANGED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 5				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
TUES				
THURS				
FRI				
ARRANGED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 8				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
TUES				
THURS				
FRI				
ARRANGED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 3				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
TUES				
THURS				
FRI				
ARRANGED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 6				

Week 1 - 8 Total Hours _____

Student Name: _____

Clinical Instructor Signature: _____

Student Signature: _____

ORANGE COAST COLLEGE RADIOLOGIC TECHNOLOGY PROGRAM

CLINICAL ATTENDANCE SHEET

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
TUES				
THURS				
FRI				
ARRANGED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 9				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
TUES				
THURS				
FRI				
ARRANGED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 10				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
TUES				
THURS				
FRI				
ARRANGED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 11				

CLINICAL AFFILIATE:

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
TUES				
THURS				
FRI				
ARRANGED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 12				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
TUES				
THURS				
FRI				
ARRANGED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 13				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
TUES				
THURS			8	
FRI				
ARRANGED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 14				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
TUES				
THURS				
FRI				
ARRANGED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 15				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
TUES				
THURS				
FRI				
ARRANGED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 16				

Total Hours For Semester _____

Student Name: _____

Clinical Instructor Signature: _____

Student Signature: _____

ORANGE COAST COLLEGE RADIOLOGIC TECHNOLOGY PROGRAM

CLINICAL ATTENDANCE SHEET RT 276

CLINICAL AFFILIATE: _____

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON				
WED				
ARRANGED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 1				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON				
WED				
ARRANGED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 4				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON				
WED				
ARRANGED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 7				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON				
WED				
ARRANGED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 2				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON				
WED				
ARRANGED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 5				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON				
WED				
ARRANGED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 8				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON				
WED				
ARRANGED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 3				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON				
WED				
ARRANGED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 6				

Week 1 - 8 Total Hours _____

Student Name: _____

Clinical Instructor Signature: _____

Student Signature: _____

ORANGE COAST COLLEGE RADIOLOGIC TECHNOLOGY PROGRAM

CLINICAL ATTENDANCE SHEET

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON				
WED				
ARRANGED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 9				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON				
WED				
ARRANGED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 10				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON				
WED				
ARRANGED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 11				

CLINICAL AFFILIATE:

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON				
WED				
ARRANGED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 12				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON				
WED				
ARRANGED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 13				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON				
WED				
ARRANGED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 14				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON				
WED				
ARRANGED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 15				

DATE	IN	OUT	TOTAL HOURS	ROOM ASSIGNMENT
MON				
WED				
ARRANGED				
	# SICK	# LATE	# LEFT EARLY	# MADE UP
TOTAL HOURS				
WEEK 16				

Total Hours For Semester _____

Student Name: _____

Clinical Instructor Signature: _____

Student Signature: _____

Anecdotal Notes

8
7
6
5
4
3
2
1

<p>Use for:</p> <p>Student requests or notations from students. (i.e. work schedule change, film badge or incident involving students – Student signs and dates note.)</p> <p>Anecdotal Notes: Attendance, film badges, conduct, incident, etc. Exemplary action or service, laudable radiographs, etc. (Note: Hospital Coordinator may quote the praise and source.)</p> <p>Date and sign. Please include your title. (i.e. staff, Hosp. Coordinator, M.D., etc.)</p> <p>Subject:</p>	<table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <td style="writing-mode: vertical-rl; transform: rotate(180deg);">Records</td> <td style="writing-mode: vertical-rl; transform: rotate(180deg);">attendance</td> <td style="writing-mode: vertical-rl; transform: rotate(180deg);">Film Badge</td> <td style="writing-mode: vertical-rl; transform: rotate(180deg);">Conduct-dress</td> <td style="writing-mode: vertical-rl; transform: rotate(180deg);">other</td> <td style="writing-mode: vertical-rl; transform: rotate(180deg);">compliments</td> </tr> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>	Records	attendance	Film Badge	Conduct-dress	other	compliments						
Records	attendance	Film Badge	Conduct-dress	other	compliments								

Name	Semester	Year
Last, First		

Student:					Direct	
Clinical Site:						
<p>Criteria: When the student is able to proficiently perform the procedure, the procedure can then be signed off by the appropriate personnel; either the educator or staff technologist. This form is used to evaluate the student performing a radiographic procedure. These evaluations are required, as the student completes a given clinical assignment as outlined in their clinical assignment schedule.</p> <p>Directions: Prior to being evaluated the student must document participation in three exams of the same type below (also documented on their Procedure Evaluation Record). After three have been documented, the student can ask for an evaluation. Observe the student as they perform the radiographic procedure(s). Upon completion, evaluate the student in the following categories according to department standards. Summarize the student’s overall performance in the section provided. If the evaluation is successful the Procedure Evaluation Record will be signed off in the appropriate column. Comments must be provided by the evaluator to the right.</p>				Date Exam MRN		
				Aspect and Criteria		
				Requisition		
				Confirms Pt. ID		
				Exam interpretation		
				Exam completion		
				Patient Care		
				Exam instruction		
				Assistance		
				Physical comfort		
				Safety		
				Exam Procedure		
				Correct film size		
				Follows dept. routine		
				Equip. manipulation		
Ethics						
Professional manner						
Legal/appropriate conversation						
Observations for Direct Competency				Appropriate touching		
	Date	Accession #	Tech Initials	Patient privacy		
Exam 1				Radiation Protection		
				Correct collimation		
				Question pregnancy		
	Date	Accession #	Tech Initials	Gonadal shielding		
Exam 2				Self		
				Exposure		
				Part measurement		
Exam 3	Date	Accession #	Tech Initials	Check chart		
				Correct technique		
Comments				Positioning		
				Organized procedure		
				Correct beam alignment		
				Correct centering		
				Film ID		
				Correct name		
				Necessary markers		
				Date and time		
				Performance speed		
				Fast		
				Average		
				Slow		
				Identified 5 anatomical structures		
				Overall performance		
				Poor – repeat necessary		
Satisfactory						
Tech Signature						
Evaluator’s Comments:						
These are required.						
Please summarize student’s overall performance and identify all problem areas.						

Second Yr. Procedure Evaluation Form –Orange Coast College Radiologic Technology EXAM _____

Student:					In - Direct	
Clinical Site:						
<p>Criteria: When the student is able to proficiently perform the procedure, the procedure can then be signed off by the appropriate personnel; either the educator or staff technologist. This form is used to evaluate the student performing a radiographic procedure. These evaluations are required, as the student completes a given clinical assignment as outlined in their clinical assignment schedule.</p> <p>Directions: Prior to being evaluated the student must document participation in three exams of the same type below (also documented on their Procedure Evaluation Record). After three have been documented, the student can ask for an evaluation. Observe the student as they perform the radiographic procedure(s). Upon completion, evaluate the student in the following categories according to department standards. Summarize the student’s overall performance in the section provided. If the evaluation is successful the Procedure Evaluation Record will be signed off in the appropriate column. Comments must be provided by the evaluator to the right.</p>				Date Exam MRN		
				Aspect and Criteria		
				Requisition		
				Confirms Pt. ID		
				Exam interpretation		
				Exam completion		
				Patient Care		
				Exam instruction		
				Assistance		
				Physical comfort		
				Safety		
				Exam Procedure		
				Correct film size		
				Follows dept. routine		
				Equip. manipulation		
Ethics						
Professional manner						
Legal/appropriate conversation						
Observations for In - Direct Competency				Appropriate touching		
	Date	Accession #	Tech Initials	Patient privacy		
Exam 1				Radiation Protection		
				Correct collimation		
				Question pregnancy		
	Date	Accession #	Tech Initials	Gonadal shielding		
Exam 2				Self		
				Exposure		
				Part measurement		
Comments				Positioning		
				Organized procedure		
				Correct beam alignment		
				Correct centering		
				Film ID		
				Correct name		
				Necessary markers		
				Date and time		
				Performance speed		
				Fast		
				Average		
				Slow		
				Identified 5 anatomical structures		
				Overall performance		
				Poor – repeat necessary		
Satisfactory						
Tech Signature						
Evaluator’s Comments:						
These are required.						
Please summarize student’s overall performance and identify all problem areas.						

PROCEDURE EVALUATION CHECK LIST - FIRST YEAR

Name: _____

Exam Category	Peds	Direct	Signature	Date	Exam Category	Peds	Direct	Signature	Date
Thorax					Portables				
Chest					Chest				
Specialized Chest					Abdomen				
S.T. Neck					Extremities:				
Chest, WC Gurney					list exams				
Upper Ext									
Digit									
Hand					Surgical				
Wrist					List exams				
Forearm									
Elbow					C-arm				
Humerus					Procedures				
Trauma UE									
					GI Tract				
Lower Ext					Abdomen/ KUB				
Toes					Acute Abdomen				
Foot					Esophagram (Ba swallow or video)				
Calcaneous					UGI				
Ankle					Small Bowel Series				
Leg/ Tib/Fib					Barium Enema				
Knee					ERCP				
Patella									
Femur									
Pelvis/Hip					GU				
Trauma LE					Urogram (IVU)				
					Cystogram (VCUG)				
Vertebral Column									
Cervical					Retrograde Urogram				
Trauma Cervical					Contrast Studies:				
Thoracic					Arthrogram				
Lumbar					Myelogram				
Sacrum/ Coccyx					Unlisted				
Unlisted									
Skull									
Routine Skull									
Unlisted									

**ORANGE COAST COLLEGE RADIOLOGIC TECHNOLOGY
CLINICAL COMPETENCIES COMPLETED**

STUDENT

MANDATORY EXAMS	Indirect	Tech	Date
EXTREMITIES			
Finger or Thumb			
Hand			
Wrist			
Forearm			
Elbow			
Humerus			
Shoulder			
Trauma Shoulder (Y-View/Trans or Axillary)			
Trauma Upper Extremity (Non-shoulder)			
Foot			
Ankle			
Tibia/Fibula			
Knee			
Femur			
Trauma Lower Extremity (Non-hip)			
PELVIS, HIP, & SPINE			
Hip			
Pelvis			
Cross Table Lateral Hip			
Cervical Spine			
C-Spine limited x-table lateral			
Thoracic Spine			
Lumbar Spine			
CHEST & THORAX			
I Chest Routine (Ambulatory)			
II Chest (WC or Stretcher)			
III Pediatric Chest *			
Ribs			
ABDOMEN			
Abdomen Supine (KUB)			
Abdomen Upright			
PORTABLES /SURGERY			
Portable Abdomen			
Portable Chest			
Portable Orthopedic			
C-Arm Orthopedic			
C-Arm Non-Orthopedic			
FLUOROSCOPY STUDIES			
Upper G.I. Series			
Small Bowel Series			
SKULL RADIOGRAPHY (2)			

**Must complete two skull exams

No more than 6 MANDATORY may be SIMULATED*

ELECTIVE EXAMS (16)	Indirect	Tech	Date
Soft Tissue Neck			
Pediatric Upper Ext. *			
Clavicle			
Chest, Decubitus			
Sternum			
A-C Joints			
Scapula			
Pediatric Abdomen *			
Scoliosis Series			
I.V. Urogram			
Sacrum and/or Coccyx			
S-I Joints			
Pediatric Lower Ext. *			
Toes			
Calcaneus or Os Calsis			
Patella			
FLUOROSCOPY STUDIES			
Esophagus			
Barium Enema			
ERCP			
Myelography			
Arthrography			
Cystogram / Cystourethrography			
SKULL RADIOGRAPHY (2)			
Skull			
Paranasal Sinuses			
Facial Bones			
Nasal			
Orbits			
Mandible			
Zygomatic Arches			
PORTABLE RADIOGRAPHY			
Pediatric Mobile Study *			
Abdomen Decubitus			

* Pediatrics = age 6 or younger

PLACE AN "S" FOR SIMULATED COMPETENCIES
TRACK COMPLETED COMPETECIES BY SEMSTER
AND PLACE THE DATE NEXT TO THE EXAM

MINIMUM COMPETENCY TOTALS

Fall semester = 13 total = 22

Winter Session = 5 total = 30

Spring semester = 13 total = 51

PROGRAM COMPLETION TOTAL:

ALL 35 MANDATORY & 16 ELECTIVES KH/LS 2015

Orange Coast College – Radiologic Technology Repeat Log

FIRST YEAR									SECOND YEAR										
	Number of Exams				Number of Repeats				Percentage of Repeats		Number of Exams				Number of Repeats				Percentage of Repeats
Week			3	4			3	4		Week			4			3	4		
Oct										Aug									
Week	1	2	3	4	1	2	3	4		Week	1	2	3	4	1	2	3	4	
Nov										Sep									
Week	1	2	3	4	1	2	3	4		Week	1	2	3	4	1	2	3	4	
Dec										Oct									
Week	1	2	3	4	1	2	3	4		Week	1	2	3	4	1	2	3	4	
Jan										Nov									
Week	1	2	3	4	1	2	3	4		Week	1	2	3	4	1	2	3	4	
Feb										Dec									
Week	1	2	3	4	1	2	3	4		Week	1	2	3	4	1	2	3	4	
Mar										Jan									
Week	1	2	3	4	1	2	3	4		Week	1	2	3	4	1	2	3	4	
Apr										Feb									
Week	1	2	3	4	1	2	3	4		Week	1	2	3	4	1	2	3	4	
May										Mar									
Week	1	2	3	4	1	2	3	4		Week	1	2	3	4	1	2	3	4	
Summer										Apr									
Week	1	2	3	4	1	2	3	4		Week	1	2	3	4	1	2	3	4	
Summer										May									

Orange Coast College First Year Procedure Evaluation Record of Radiologic Procedures

Name: _____

Clinical Site: _____

Criteria: To achieve successful completion of the first year phase of the clinical training, a student must demonstrate proficiency in performing 85% of the listed exams according to clinical standards. Proficiency must be verified by utilizing the "Procedure Evaluation" form. No proficiency sign-off is permitted until the minimum of three successful exam performances have been completed in a given body area. Follow directions as stated on "Procedure Evaluation" form.

Directions When the student is able to competently perform the radiographic procedure under the conditions described, the radiology staff member (technologist, supervisor, or clinical educator) will sign-off the student by placing their signature/date in the appropriate columns next to the radiographic exam. It is the student's responsibility to have the performance evaluation list completed by the end of the first year Summer Session, however, specific exams should be completed for each designated clinical course as identified below. Periodic review of the student's progress by the clinical educator is required.

Grading: To achieve successful completion of each clinical course, the student should be competent in the procedures suggested for that course, however the student must achieve competency in the following identified exams:

Note: These are the minimum competencies for each clinical course, working ahead to the next clinical course is permitted once the minimum has been completed.

RT 171

Routine Chest
1 Additional Routine
Exam

RT 172

1 GI Exam
2 Portable exams
Hand/wrist + 1 add. UE Exam
Foot/ankle + 1 add. LE Exam
Acute Abdomen Series

RT 176

2 GI/GU Procedures
4 Non unit portable exams
5 upper extremity exams
5 lower extremity exams
2 Spine or S.T. neck exams
Completes 25 Procedure eval.
listed on first yr. Procedure
Eval. Record.
2 spine exams

RT 177

4 GI/GU Procedures
1 Surgery/C-arm Exam.
Trauma study
Procedure setup for
Contrast Media exam
Completes 42 Proc.
Evals. listed on the
first year Procedure
Evaluation Record

Orange Coast College Second Year Procedure Evaluation Record of Radiologic Procedures

Name: _____

Clinical Site: _____

Criteria: To achieve successful completion of the clinical phase of the Program, a student must demonstrate proficiency in 90% of the listed exams according to clinical standards. Proficiency must be verified by utilizing the “Procedure Evaluation” form. No indirect sign-off is permitted until the minimum of three successful exam performances have been completed in a given body area. **NOTE: You are required to complete indirect supervision of 90% of the listed exams during the second year, there is no carry-over from the first year.**

Directions When the student is able to competently perform the radiographic procedure under the conditions described, the radiology staff member (technologist, supervisor, or clinical educator) will sign-off the student by placing their signature/date in the appropriate columns next to the radiographic exam. It is the student’s responsibility to have the performance evaluation list completed by the end of the second year Spring Semester, however, specific exams should be completed for each designated clinical course as identified below. Periodic review of the student’s progress by the clinical educator is required.

Grading: To achieve successful completion of each clinical course, the student should be competent in the procedures suggested for that course, however the student must achieve competency in the following identified exams:

Note: These are the minimum competencies for each clinical course, working ahead to the next clinical course is permitted once the minimum has been completed.

RT 271

Routine Skull
 Routine Sinus
 One other Cranial exam
 Pelvis/Hip
 Shoulder
 One contrast media exam
 24 exams on the Procedure Eval. Record completed

RT 276

Portable exams (3 minimum)
 Surgery/C-arm
 Contrast and Non-contrast exams
 32 exams on the Procedure Eval. Record completed

RT 277

52 exams on the Pro. Ev. Rec. completed
 Pediatric exams
 Geriatric exams
 Nursing/Pt Care Competencies
 QC/QA Competencies

**Some exams are uncommon or otherwise unavailable for clinical proficiency. Under those circumstances a laboratory/clinical simulation may be performed using clinical site standards of positioning, film/screen selection, and technique settings. Clinical Educator must approve exams chosen for simulation.*

DAILY CLINICAL CASE RECORD

It is **required** that you keep a record of the kinds and numbers of examinations you perform during your clinical training. Some cases you will perform independently, some with a varying amount of supervision, and in some instances, you will perform as a technologist team member. It is vital that you have a broad and varied clinical training experience. By keeping a day-to-day, month-to-month accounting of your experiences, you will be able to readily identify any voids in your clinical practicum.

1. Day slips are available at each hospital. Keep one in your pocket and check off each case you perform or participate in.
2. On a daily or weekly basis, transfer the day slip information onto the monthly sheet, and retain daily slips in your file for future retrieval of cases.
3. Although your hospital attempts to provide you with learning experiences that are compatible with the objectives for each clinical course, your personal record keeping will reveal to you whether or not you are experiencing a well rounded education.
4. **Each student must assess his progress, identify voids, and aggressively assert himself/herself when the case assignments are made.**
5. The student SHOULD NOT record cases that were observed ONLY. If the student “handed cassettes” and was at the technologist’s elbow during the study, it should be recorded. Mere “looking on” does not qualify.
6. Additional documentation is required on the clinical case record, includes number and cause of repeat radiographs.
7. All repeat radiographs must be verified by the technologist who **directly supervised** the repeat film. Their initials are **written next to the number of repeated films** needed to be taken.

REPEAT FILM LOG SHEET

REPEAT ANALYSIS

Directions:

Every film that is taken must be documented. For example, a chest x-ray takes two films. If a student did only a chest x-ray that day, then in the first block under 1st week-daily, he should write in a "2." If he repeated one of those films, then under repeats-daily block write in "1." Do the same for the next day, week and month.

At the end of the month, count up all the films taken and how many repeats done. Divide the total number of monthly repeats **by** the total monthly films and place in last block marked percentage of repeats. This person would have a 50% repeat rate (see examples below). Complete the entries for the remainder of the month. The idea is to keep track of repeats and keep percentages low.

Repeat analysis helps the student to identify weak areas that need to be strengthened. Program requirements are no more than a 6% repeat rate that decreases to 3% repeat at program completion.

Repeat rate will be calculated as follows:

$$\frac{\text{Number of repeats}}{\text{Number of exams multiplied by 4}} \times 100 = \text{Repeat Percentage}$$

Example # 1:

$$\frac{24 \text{ repeats}}{100 \text{ exams} \times 4} = \times 100 = 6\%$$

**Orange Coast College
Radiologic Technology Program**

Fluoroscopy – Clinical Orientation Record

In order to comply with changes to 17 CCR, section 30423 with regards to fluoroscopy training all students will complete an orientation to all fluoroscopy units they will utilize as part of their clinical training. This orientation will be documented separately from the department included in the Student Clinical Manual.

Room or C-arm	Machine Operation		Safety	
		Tech init		Tech init
	Cumulative timer reset		Table drapes	
	Dose monitoring		Apron location	
	Mag Mode		Thyroid shield location	
	Grid		Lead barrier location	
	Compression		Leaded glasses location	
	Cumulative timer reset		Table drapes	
	Dose monitoring		Apron location	
	Mag Mode		Thyroid shield location	
	Grid		Lead barrier location	
	Compression		Leaded glasses location	
	Cumulative timer reset		Table drapes	
	Dose monitoring		Apron location	
	Mag Mode		Thyroid shield location	
	Grid		Lead barrier location	
	Compression		Leaded glasses location	
	Cumulative timer reset		Table drapes	
	Dose monitoring		Apron location	
	Mag Mode		Thyroid shield location	
	Grid		Lead barrier location	
	Compression		Leaded glasses location	
	Cumulative timer reset		Table drapes	
	Dose monitoring		Apron location	
	Mag Mode		Thyroid shield location	
	Grid		Lead barrier location	
	Compression		Leaded glasses location	
	Cumulative timer reset		Table drapes	
	Dose monitoring		Apron location	
	Mag Mode		Thyroid shield location	
	Grid		Lead barrier location	
	Compression		Leaded glasses location	

**Orange Coast College
Radiologic Technology Program**

Fluoroscopy – Clinical Training Record

In order to comply with changes to 17 CCR, section 30423 with regards to fluoroscopy training all students will track separately the fluoroscopy examinations they participate in. Examples could include; any surgical exam using fluoroscopy, GI exams, lumbar punctures (if fluoro is used), Swallow function studies, ERCP, and any other exam using fluoroscopy. Each student will record a minimum of 50 fluoroscopy exams and a minimum of 40 hours of clinical fluoroscopy training.

	Date	Exam	Location	Exam Length	Tech init.	Tech cert or permit #
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
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45						
46						
47						
48						
49						
50						

Student Signature

Date

Faculty Signature

Date

RT 171 CLINICAL OBJECTIVES

STANDARD I APPEARANCE, DEPENDABILITY, ATTITUDE AND RESPONSIBILITY: Develops a strong professional manner and courtesy; accepts and profits from constructive criticism; has the ability to work with others effectively; reliable and persistent in following policies and rules regarding professional appearance and attendance. **CONDITION:** As defined in Student Clinical Manual and clinical affiliate’s policies; while assigned to clinical duty.

PERFORMANCE LEVEL:

4 = Excellent; consistently at or above expectations
2 = Meets only minimum expectations

3 = Acceptable; frequently above standards
0 = unacceptable

PERFORMANCE CRITERIA		MET	UNMET	COMMENTS	POINTS DEDUCTION
Attendance is within program standards.					
2 absences = 2 point deduction ; 3 absences = 3 point deduction ; For each absence beyond 3 an additional 1 point deduction . Critical incident must be issued if absences have not been validated.					
Notifies Clinical Educator and Clinical Coordinator when unable to report to clinical site.					
First incident reminder of policy, second written warning, third occurrence = 2 point deduction each successive occurrence will result in an additional 1 point deduction					
Reports for duty ready for training at the designated time.					
Tardies: After the first two a one point deduction , an additional point deduction for each successive occurrence.					
PERFORMANCE CRITERIA		SCORE		COMMENTS	
1	Follows dress code of school or clinical facility, as applicable; including ID badge and dosimeter.	/			
2	Presents a clean, neat appearance and practices good personal hygiene.	/			
3	Adheres to allotted times for breaks and lunch.	/			
4	Remains on duty for total hours assigned.	/			
5	Arranges with clinical educator for makeup hours and/or duty variations and documents it.	/			
6	Demonstrates knowledge of professional ethics in relationship to technologists and physicians.	/			
7	Demonstrates a spirit of cooperation, initiative and willingness to learn.	/			
8	Volunteers and willingly accepts assignments as given.	/			
9	Accepts criticism and strives to profit from it.	/			
10	Listens to and follows instructions, asks pertinent questions when uncertain.	/			
11	Makes appropriate judgment and asks for assistance when necessary, in relation to their level of knowledge and experience.	/			
Average Score		/ %		Total all scores. Divide total by 44 (maximum possible score this standard). Note number as a percentage.	

RT 171 - STANDARD II - PROFESSIONAL COMMUNICATION and PATIENT CARE

Understanding of duties and ability to interact with patients on an appropriate level of care. Skill in performing assigned tasks related to the physical care of patients.

CONDITION: As defined in Student Clinical Manual and clinical affiliate’s policies; while on duty.

PERFORMANCE LEVEL:

4 = Excellent; consistently at or above expectations

3 = Acceptable; frequently above standards

2 = Meets only minimum expectations

0 = unacceptable

PERFORMANCE CRITERIA		SCORE	COMMENTS
1	Locates patient’s rooms, departments, and special units within facility.		
2	Demonstrates effective patient communication skills regarding: a. Patient greeting and ID b. Procedure explanation c. Interprets nonverbal signs of discomfort		
3	Demonstrates concern for patient’s well-being, including comfort and modesty.		
4	Demonstrates appropriate patient/technologist relationship as observed in professional comments and conversations.		
5	Avoids discussion of diagnosis/prognosis, maintains patient confidentiality.		
6	Respects the patient as an individual.		
7	Utilizes appropriate infection control measures to include; isolation protocols and standard precautions.		
8	Transports and transfers patients safely and efficiently; locks wheel on gurney or wheelchair prior to transfer.		
9	Practices proper patient moving and lifting technique with concern for patient and personal safety.		
10	Knows location and purpose of crash cart.		
Average Score		%	Total all scores. Divide total by 48 (maximum possible score this standard). Note number as a percentage.

RT 171 - STANDARD III - DEPARTMENT PROCEDURES and RADIATION PROTECTION

Demonstrates knowledge of radiation protection for patients, self and staff.

CONDITION: Speed in mastering and understanding new work routines and methods.

PERFORMANCE LEVEL: Able to perform duties in accordance with department protocol with **moderate supervision**.

4 = Excellent; consistently at or above expectations

3 = Acceptable; frequently above standards

2 = Meets only minimum expectations

0 = unacceptable

PERFORMANCE CRITERIA		MET	UNMET	COMMENTS	SCORE DEDUCTION
Demonstrates effective assessment of patient's pregnancy status.					
First incident written warning, second occurrence = 2 point deduction each successive occurrence will result in an additional 1 point deduction					
Follows the repeat policy for necessary repeated images.					
First incident written warning, second occurrence = 2 point deduction each successive occurrence will result in an additional 2 point deduction					
PERFORMANCE CRITERIA		SCORE		COMMENTS	
1	Processing of exam requisition and related department documents.	/			
2	Performs basic PACS archiving duties and post digital imaging processing.	/			
3	Performs routine image processing procedures.	/			
4	Demonstrates ability to identify image receptor size for various exams	/			
5	Clean, stock and maintain radiographic rooms; maintaining basic stock supplies and overall appearance.	/			
6	Completed clinical facility orientation	/			
7	Utilizes effective gonadal shielding for patients.	/			
8	Applies methods of radiation protection for self during radiographic and/or fluoroscopic procedures.	/			
9	Protection for any additional persons in room.	/			
10	Shows evidence of collimation as appropriate for exams performed.	/			
	Average Score	/ %		Total all scores. Divide total by 40 (maximum possible score this standard). Note number as a percentage.	

RT 171 STANDARD IV: RADIOGRAPHIC PROCEDURES and PROFESSIONAL GROWTH:

Overall ability to learn and perform radiographic procedures under **direct supervision** while demonstrating progressive growth and willingness to develop new skills

CONDITION: As measured by facility defined Room/Equipment sign off sheets and Performance Evaluation Sheets.

PERFORMANCE LEVEL: All criteria **shall be met** to a level in which (under a student’s scope of care), the radiographic quality of the exam will be diagnostic in accordance with department protocol.

*This standard should **measure student’s efforts** and progressing abilities to perform exams and NOT specifically upon the number of performance evaluations completed.

PERFORMANCE CRITERIA		MET	UNMET	COMMENTS	SCORE DEDUCTION
Turns in clinical documentation as required and on-time					
First incident written warning, second occurrence = 2 point deduction each successive occurrence will result in an additional 1 point deduction					
PERFORMANCE CRITERIA		SCORE		COMMENTS	
1	Set technical factors on control panel.	/			
2	Performs basic manipulation of the radiographic equipment as defined by the Room/Equipment sign-off sheet.				
3	Ability to identify exposure factors and their relationship to radiographic quality.				
4	Maintains clinical record of procedures performed and observed on an ongoing basis.				
5	Completes Procedure Evaluation for routine chest radiograph Completed Procedure Evaluation Score 4 Attempted in-complete Procedure Evaluation Score 2				
6	Completes Procedure Evaluations an additional radiographic procedure Completed Procedure Evaluation Score 4 Attempted in-complete Procedure Evaluation Score 2				
	Average Score	%		Total all scores. Divide total by 24 (maximum possible score this standard). Note number as a percentage.	

CLINICAL OBJECTIVES RT 171

STANDARDS	*AVERAGE SCORE %	MULTIPLY BY	TOTAL SCORE
STANDARD I: Appearance, Dependability, Attitude, and Responsibility		Multiply by 25% (.25)	
STANDARD I: DEDUCTIONS			
STANDARD II: Professional Communication AND Patient Care		Multiply by 20% (.20)	
STANDARD III: Department Procedures and Radiation Protection		Multiply by 15% (.15)	
STANDARD III: DEDUCTIONS			
STANDARD IV: Radiographic Procedures and Professional Growth		Multiply by 40% (.40)	
STANDARD IV: DEDUCTIONS			
Should a documented counseling session occur for failure to meet the performance criteria of any clinical objective a score of (-2) will be assigned.			
Should a Critical Incident occur for failure to meet the performance criteria of any clinical objective a score of (-4) will be assigned.			
Final Grade: Total Average		(add weighted standards)	
Grading Scale:	A=100-90; B=89-80; C=79-70; D=69-60; F=below 60		
Grade Key: For the Final Grade the weighted score should NOT be rounded up.	4=Excellent; consistently at or above standards, or no more than 1 infraction. 3=Acceptable; frequently above standards, or no more than 2 infractions. 2=Meets only minimum standards. 1=Unacceptable; below expectations, or no more than 3 infractions. 0=Critical incident has been issued, or more than 3 infractions.		

***Note:** Each standard must also be passed with 80% or better, or the student will be subject to Program action.

Check one:

_____ Satisfactory course completion and progression to next clinical course based upon final score.

_____ Unsatisfactory course completion and recommend non-continuation of program.

Summarize student's progress for this clinical course (use narrative format).

Clinical Educator: _____ Signature _____ Date: _____

College: _____ Signature _____ Date: _____

Student _____ Date: _____

RT 172 CLINICAL OBJECTIVES

STANDARD I APPEARANCE, DEPENDABILITY, ATTITUDE AND RESPONSIBILITY: Develops a strong professional manner and courtesy; accepts and profits from constructive criticism; has the ability to work with others effectively; reliable and persistent in following policies and rules regarding professional appearance and attendance. **CONDITION:** As defined in Student Clinical Manual and clinical affiliate’s policies; while assigned to clinical duty.

PERFORMANCE LEVEL:

4 = Excellent; consistently at or above expectations
2 = Meets only minimum expectations

3 = Acceptable; frequently above standards
0 = unacceptable

PERFORMANCE CRITERIA		MET	UNMET	COMMENTS	POINTS DEDUCTION
Attendance is within program standards.					
2 absences = 2 point deduction ; 3 absences = 3 point deduction ; For each absence beyond 3 an additional 1 point deduction . Critical incident must be issued if absences have not been validated.					
Notifies Clinical Educator and Clinical Coordinator when unable to report to clinical site.					
First incident reminder of policy, second written warning, third occurrence = 2 point deduction each successive occurrence will result in an additional 1 point deduction					
Reports for duty ready for training at the designated time.					
Tardies: After the first two a one point deduction , an additional point deduction for each successive occurrence.					
PERFORMANCE CRITERIA		SCORE		COMMENTS	
1	Follows dress code of school or clinical facility, as applicable; including ID badge and dosimeter.	/			
2	Presents a clean, neat appearance and practices good personal hygiene.	/			
3	Adheres to allotted times for breaks and lunch.	/			
4	Remains on duty for total hours assigned.	/			
5	Arranges with clinical educator for makeup hours and/or duty variations and documents it.	/			
6	Demonstrates knowledge of professional ethics in relationship to technologists and physicians.	/			
7	Demonstrates a spirit of cooperation, initiative and willingness to learn.	/			
8	Volunteers and willingly accepts assignments as given.	/			
9	Accepts criticism and strives to profit from it.	/			
10	Listens to and follows instructions, asks pertinent questions when uncertain.	/			
11	Makes appropriate judgment and asks for assistance when necessary, in relation to their level of knowledge and experience.	/			
Average Score		/ %		Total all scores. Divide total by 44 (maximum possible score this standard). Note number as a percentage.	

RT 172 - STANDARD II - PROFESSIONAL COMMUNICATION and PATIENT CARE

Understanding of duties and ability to interact with patients on an appropriate level of care. Skill in performing assigned tasks related to the physical care of patients.

CONDITION: As defined in Student Clinical Manual and clinical affiliate’s policies; while on duty.

PERFORMANCE LEVEL:

4 = Excellent; consistently at or above expectations

3 = Acceptable; frequently above standards

2 = Meets only minimum expectations

0 = unacceptable

PERFORMANCE CRITERIA		SCORE	COMMENTS
1	Demonstrates effective patient communication skills regarding: a. Patient greeting and ID b. Procedure explanation c. Interprets nonverbal signs of discomfort		
2	Demonstrates concern for patient’s well-being, including comfort and modesty.		
3	Demonstrates appropriate patient/technologist relationship as observed in professional comments and conversations.		
4	Avoids discussion of diagnosis/prognosis, maintains patient confidentiality.		
5	Respects the patient as an individual.		
6	Demonstrates ability to maintain patency/flow of peripherals (i.e.: O ₂ , IV’s urinary catheter, etc.)		
7	Utilizes appropriate infection control measures to include; isolation protocols and standard precautions.		
8	Can identify the difference between a drip IV and pump assisted IV.		
Average Score		%	Total all scores. Divide total by 40 (maximum possible score this standard). Note number as a percentage.

RT 172 - STANDARD III - DEPARTMENT PROCEDURES and RADIATION PROTECTION

Demonstrates knowledge of radiation protection for patients, self and staff.

CONDITION: Speed in mastering and understanding new work routines and methods.

PERFORMANCE LEVEL: Able to perform duties in accordance with department protocol with **moderate supervision**.

4 = Excellent; consistently at or above expectations

3 = Acceptable; frequently above standards

2 = Meets only minimum expectations

0 = unacceptable

PERFORMANCE CRITERIA		MET	UNMET	COMMENTS	SCORE DEDUCTION
Demonstrates effective assessment of patient's pregnancy status.					
First incident written warning, second occurrence = 2 point deduction each successive occurrence will result in an additional 1 point deduction.					
Follows the repeat policy for necessary repeated images.					
First incident written warning, second occurrence = 2 point deduction each successive occurrence will result in an additional 2 point deduction.					
PERFORMANCE CRITERIA		SCORE		COMMENTS	
1	Processing of exam requisition and related department documents.	/			
2	Performs basic PACS archiving duties and post digital imaging processing.	/			
3	Can identify CR and DR image receptors.	/			
4	Clean, stock and maintain radiographic rooms; maintaining basic stock supplies and overall appearance.	/			
5	Utilizes effective gonadal shielding for patients.	/			
6	Applies methods of radiation protection for self during radiographic and/or fluoroscopic procedures.	/			
7	Shows evidence of collimation as appropriate for exams performed.	/			
	Average Score	/ %		Total all scores. Divide total by 28 (maximum possible score this standard). Note number as a percentage.	

RT 172 STANDARD IV: RADIOGRAPHIC PROCEDURES and PROFESSIONAL GROWTH:

Overall ability to learn and perform radiographic procedures under **direct/indirect supervision** while demonstrating progressive growth and willingness to develop new skills

CONDITION: As measured by facility defined Room/Equipment sign off sheets and Performance Evaluation Sheets.

PERFORMANCE LEVEL: All criteria **shall be met** to a level in which (under a student’s scope of care), the radiographic quality of the exam will be diagnostic in accordance with department protocol.

*This standard should **measure student’s efforts** and progressing abilities to perform exams and NOT specifically upon the number of performance evaluations completed.

PERFORMANCE CRITERIA		MET	UNMET	COMMENTS	SCORE DEDUCTION
Turns in clinical documentation as required and on-time					
First incident written warning, second occurrence = 2 point deduction each successive occurrence will result in an additional 1 point deduction					
PERFORMANCE CRITERIA		SCORE		COMMENTS	
1	Set technical factors and radiographic and fluoroscopic control panels.	/			
2	Completes GI Procedure Set up and Scout; sets technical factors, contrast preparation, readies equipment for Fluoroscopist. Completes GI Procedure Evaluation Score = 4 GI Procedure Set-up & Scout only Score = 2				
3	Completes Procedure Evaluations for 2 portable/mobile exams under direct supervision. 2 portable/mobile Procedure Evals = 4 points 1 portable/mobile Procedure Evals = 2 points				
4	Completes Procedure Evaluations for 2 routine upper extremity procedures. Hand or Wrist + 1 Procedure Evaluation Score 4 Hand or Wrist Score 2				
5	Completes Procedure Evaluations for 2 routine lower extremity procedures. Foot or Ankle + 1 Procedure Evaluation Score 4 Foot or Ankle Score 2				
6	Completes Procedure Evaluation for upright abdomen or decubitus abdomen Completes upright or decubitus Score = 4				
	Average Score		%	Total all scores. Divide total by 24 (maximum possible score this standard). Note number as a percentage.	

CLINICAL OBJECTIVES RT 172

STANDARDS	*AVERAGE SCORE %	MULTIPLY BY	TOTAL SCORE
STANDARD I: Appearance, Dependability, Attitude, and Responsibility		Multiply by 25% (.25)	
STANDARD I: DEDUCTIONS			
STANDARD II: Professional Communication AND Patient Care		Multiply by 20% (.20)	
STANDARD III: Department Procedures and Radiation Protection		Multiply by 15% (.15)	
STANDARD III: DEDUCTIONS			
STANDARD IV: Radiographic Procedures and Professional Growth		Multiply by 40% (.40)	
STANDARD IV: DEDUCTIONS			
Should a documented counseling session occur for failure to meet the performance criteria of any clinical objective a score of (-2) will be assigned.			
Should a Critical Incident occur for failure to meet the performance criteria of any clinical objective a score of (-4) will be assigned.			
Final Grade: Total Average		(add weighted standards)	
Grading Scale:	A=100-90; B=89-80; C=79-70; D=69-60; F=below 60		
Grade Key: For the <u>Final Grade</u> the weighted score should NOT be rounded up.	4=Excellent; consistently at or above standards, or no more than 1 infraction. 3=Acceptable; frequently above standards, or no more than 2 infractions. 2=Meets only minimum standards. 1=Unacceptable; below expectations, or no more than 3 infractions. 0=Critical incident has been issued, or more than 3 infractions.		

***Note:** Each standard must also be passed with 80% or better, or the student will be subject to Program action.

Check one:

Satisfactory course completion and progression to next clinical course based upon final score.

Unsatisfactory course completion and recommend non-continuation of program.

Summarize student's progress for this clinical course (use narrative format).

Clinical Educator: Signature _____ Date: _____

College: Signature _____ Date: _____

Student _____ Date: _____

RT 176 CLINICAL OBJECTIVES

STANDARD I APPEARANCE, DEPENDABILITY, ATTITUDE AND RESPONSIBILITY: Develops a strong professional manner and courtesy; accepts and profits from constructive criticism; has the ability to work with others effectively; reliable and persistent in following policies and rules regarding professional appearance and attendance. **CONDITION:** As defined in Student Clinical Manual and clinical affiliate’s policies; while assigned to clinical duty.

PERFORMANCE LEVEL:

4 = Excellent; consistently at or above expectations
2 = Meets only minimum expectations

3 = Acceptable; frequently above standards
0 = unacceptable

PERFORMANCE CRITERIA		MET	UNMET	COMMENTS	POINTS DEDUCTION
Attendance is within program standards.					
2 absences = 2 point deduction ; 3 absences = 3 point deduction ; For each absence beyond 3 an additional 1 point deduction . Critical incident must be issued if absences have not been validated.					
Notifies Clinical Educator and Clinical Coordinator when unable to report to clinical site.					
First incident reminder of policy, second written warning, third occurrence = 2 point deduction each successive occurrence will result in an additional 1 point deduction .					
Reports for duty ready for training at the designated time.					
Tardies: After the first two a one point deduction , an additional point deduction for each successive occurrence .					
PERFORMANCE CRITERIA		SCORE		COMMENTS	
1	Follows dress code of school or clinical facility, as applicable; including ID badge and dosimeter.	/			
2	Presents a clean, neat appearance and practices good personal hygiene.	/			
3	Adheres to allotted times for breaks and lunch.	/			
4	Remains on duty for total hours assigned.	/			
5	Arranges with clinical educator for makeup hours and/or duty variations and documents it.	/			
6	Demonstrates knowledge of professional ethics in relationship to technologists and physicians.	/			
7	Demonstrates a spirit of cooperation, initiative and willingness to learn.	/			
8	Volunteers and willingly accepts assignments as given.	/			
9	Accepts criticism and strives to profit from it.	/			
10	Listens to and follows instructions, asks pertinent questions when uncertain.	/			
11	Makes appropriate judgment and asks for assistance when necessary, in relation to their level of knowledge and experience.	/			
12	Works efficiently, demonstrating logical exam sequence.	/			
Average Score		/ %		Total all scores. Divide total by 48 (maximum possible score this standard). Note number as a percentage.	

RT 176 - STANDARD II - PROFESSIONAL COMMUNICATION and PATIENT CARE

Understanding of duties and ability to interact with patients on an appropriate level of care. Skill in performing assigned tasks related to the physical care of patients.

CONDITION: As defined in Student Clinical Manual and clinical affiliate’s policies; while on duty.

PERFORMANCE LEVEL:

4 = Excellent; consistently at or above expectations

3 = Acceptable; frequently above standards

2 = Meets only minimum expectations

0 = unacceptable

PERFORMANCE CRITERIA		SCORE	COMMENTS
1	Demonstrates effective patient communication skills regarding: a. Exam preparation b. Procedure explanation c. Obtaining pertinent history		
2	Assists in obtaining patient consent according to department policies.		
3	Demonstrates concern for patient’s well-being, including comfort and modesty.		
4	Demonstrates appropriate patient/technologist relationship as observed in professional comments and conversations.		
5	Avoids discussion of diagnosis/prognosis, maintains patient confidentiality.		
6	Respects the patient as an individual.		
7	Demonstrates ability to maintain patency/flow of peripherals (i.e.: O ₂ , IV’s urinary catheter, etc.)		Competency documentation of all performance criteria required via Nursing/Patient Care sign-off sheet
8	Utilizes appropriate infection control measures to include; isolation protocols and standard precautions.		
9	Demonstrates aseptic technique in preparation of contrast media.		
10	Has begun orientation to sterile field and tray preparation.		
11	Practices proper patient moving and lifting technique with concern for patient and personal safety.		
	Knows location and purpose of crash cart.		
Average Score		%	Total all scores. Divide total by 56 (maximum possible score this standard). Note number as a percentage.

RT 176 - STANDARD III - DEPARTMENT PROCEDURES and RADIATION PROTECTION

Demonstrates knowledge of radiation protection for patients, self and staff.

CONDITION: Speed in mastering and understanding new work routines and methods.

PERFORMANCE LEVEL: Able to perform duties in accordance with department protocol with **moderate supervision**.

4 = Excellent; consistently at or above expectations

3 = Acceptable; frequently above standards

2 = Meets only minimum expectations

0 = unacceptable

PERFORMANCE CRITERIA	MET	UNMET	COMMENTS	SCORE DEDUCTION
Demonstrates effective assessment of patient's pregnancy status.				
First incident written warning, second occurrence = 2 point deduction each successive occurrence will result in an additional 1 point deduction.				
Follows the repeat policy for necessary repeated images.				
First incident written warning, second occurrence = 2 point deduction each successive occurrence will result in an additional 2 point deduction.				

PERFORMANCE CRITERIA	SCORE	COMMENTS
1 Processing of exam requisition and related department documents.	/	
2 Performs basic PACS archiving duties and post digital imaging processing.	/	
3 Understands workflow and exam scheduling; participates in Reception area rotation.	/	
4 Clean, stock and maintain radiographic rooms; maintaining basic stock supplies and overall appearance.	/	
5 Demonstrates preparation of appropriate contrast media for contrast procedures.	/	
6 Orients to surgical/sterile field environment. Orients to appropriate dress and barrier protocols per facility.	/	
7 Evaluates image quality; demonstrates ability to critique radiographs and suggest appropriate corrections in technique or positioning with an accuracy of 70%.	/	
8 Utilizes effective gonadal shielding for patients.	/	
9 Applies methods of radiation protection for self during radiographic and/or fluoroscopic procedures.	/	
1 Protection for any additional persons in room.	/	
0	/	
1 Shows evidence of collimation as appropriate for exams performed.	/	
Average Score	/ %	Total all scores. Divide total by 44 (maximum possible score this standard). Note number as a percentage.

CLINICAL OBJECTIVES RT 176

STANDARDS	*AVERAGE SCORE %	MULTIPLY BY	TOTAL SCORE
STANDARD I: Appearance, Dependability, Attitude, and Responsibility		Multiply by 15% (.15)	
STANDARD I: DEDUCTIONS			
STANDARD II: Professional Communication AND Patient Care		Multiply by 15% (.15)	
STANDARD III: Department Procedures and Radiation Protection		Multiply by 15% (.15)	
STANDARD III: DEDUCTIONS			
STANDARD IV: Radiographic Procedures and Professional Growth		Multiply by 55% (.55)	
STANDARD IV: DEDUCTIONS			
Should a documented counseling session occur for failure to meet the performance criteria of any clinical objective a score of (-2) will be assigned.			
Should a Critical Incident occur for failure to meet the performance criteria of any clinical objective a score of (-4) will be assigned.			
Final Grade: Total Average		(add weighted standards)	
Grading Scale:	A=100-90; B=89-80; C=79-70; D=69-60; F=below 60		
Grade Key: For the Final Grade the weighted score should <u>NOT</u> be rounded up.	4=Excellent; consistently at or above standards, or no more than 1 infraction. 3=Acceptable; frequently above standards, or no more than 2 infractions. 2=Meets only minimum standards. 1=Unacceptable; below expectations, or no more than 3 infractions. 0=Critical incident has been issued, or more than 3 infractions.		

***Note:** Each standard must also be passed with 80% or better, or the student will be subject to Program action.

Check one:

_____ Satisfactory course completion and progression to next clinical course based upon final score.

_____ Unsatisfactory course completion and recommend non-continuation of program.

Summarize student's progress for this clinical course (use narrative format).

Clinical Educator: Signature _____ Date: _____

College: Signature _____ Date: _____

Student _____ Date: _____

RT 177 CLINICAL OBJECTIVES

STANDARD I APPEARANCE, DEPENDABILITY, ATTITUDE AND RESPONSIBILITY: Develops a strong professional manner and courtesy; accepts and profits from constructive criticism; has the ability to work with others effectively; reliable and persistent in following policies and rules regarding professional appearance and attendance. **CONDITION:** As defined in Student Clinical Manual and clinical affiliate’s policies; while assigned to clinical duty.

PERFORMANCE LEVEL:

4 = Excellent; consistently at or above expectations
2 = Meets only minimum expectations

3 = Acceptable; frequently above standards
0 = unacceptable

PERFORMANCE CRITERIA		MET	UNMET	COMMENTS	POINTS DEDUCTION
Attendance is within program standards.					
2 absences = 2 point deduction ; 3 absences = 3 point deduction ; For each absence beyond 3 an additional 1 point deduction . Critical incident must be issued if absences have not been validated.					
Notifies Clinical Educator and Clinical Coordinator when unable to report to clinical site.					
First incident reminder of policy, second written warning, third occurrence = 2 point deduction each successive occurrence will result in an additional 1 point deduction .					
Reports for duty ready for training at the designated time.					
Tardies: After the first two a one point deduction , an additional point deduction for each successive occurrence .					
PERFORMANCE CRITERIA		SCORE		COMMENTS	
1	Follows dress code of school or clinical facility, as applicable; including ID badge and dosimeter.	/			
2	Presents a clean, neat appearance and practices good personal hygiene.	/			
3	Adheres to allotted times for breaks and lunch.	/			
4	Remains on duty for total hours assigned.	/			
5	Arranges with clinical educator for makeup hours and/or duty variations and documents it.	/			
6	Demonstrates knowledge of professional ethics in relationship to technologists and physicians.	/			
7	Demonstrates a spirit of cooperation, initiative and willingness to learn.	/			
8	Volunteers and willingly accepts assignments as given.	/			
9	Accepts criticism and strives to profit from it.	/			
10	Listens to and follows instructions, asks pertinent questions when uncertain.	/			
11	Makes appropriate judgment and asks for assistance when necessary, in relation to their level of knowledge and experience.	/			
12	Works efficiently, demonstrating logical exam sequence.	/			
Average Score		/ %		Total all scores. Divide total by 48 (maximum possible score this standard). Note number as a percentage.	

RT 177 - STANDARD II - PROFESSIONAL COMMUNICATION and PATIENT CARE

Understanding of duties and ability to interact with patients on an appropriate level of care. Skill in performing assigned tasks related to the physical care of patients.

CONDITION: As defined in Student Clinical Manual and clinical affiliate’s policies; while on duty.

PERFORMANCE LEVEL:

4 = Excellent; consistently at or above expectations

3 = Acceptable; frequently above standards

2 = Meets only minimum expectations

0 = unacceptable

PERFORMANCE CRITERIA		SCORE	COMMENTS
1	Demonstrates effective patient communication skills regarding: a. Procedure explanation b. Obtaining pertinent history c. Post-procedure instructions/education	/	
2	Assists in obtaining patient consent according to department policies.	/	
3	Demonstrates concern for patient’s well-being, including comfort and modesty.	/	
4	Demonstrates appropriate patient/technologist relationship as observed in professional comments and conversations.	/	
5	Avoids discussion of diagnosis/prognosis, maintains patient confidentiality.	/	
6	Respects the patient as an individual.	/	
7	Demonstrates ability to maintain patency/flow of peripherals (i.e.: O ₂ , IV’s urinary catheter, etc.).	/	Competency documentation of all performance criteria required via Nursing/Patient Care sign-off sheet.
8	Utilizes appropriate infection control measures to include; isolation protocols and standard precautions.	/	
9	Demonstrates ability to setup sterile tray under direct supervision.	/	
10	Demonstrates correct disposal of contrast delivery systems. Correctly disposes of all supplies contaminated with blood or body fluids.	/	
11	Practices proper patient moving and lifting technique with concern for patient and personal safety.	/	
12	Demonstrates ability to care for special needs patient population (i.e. pediatric, geriatric and mentally challenged).	/	
Average Score		%	Total all scores. Divide total by 56 (maximum possible score this standard). Note number as a percentage.

RT 177 - STANDARD III - DEPARTMENT PROCEDURES and RADIATION PROTECTION

Demonstrates knowledge of radiation protection for patients, self and staff.

CONDITION: Speed in mastering and understanding new work routines and methods.

PERFORMANCE LEVEL: Able to perform duties in accordance with department protocol with **moderate supervision**.

4 = Excellent; consistently at or above expectations

3 = Acceptable; frequently above standards

2 = Meets only minimum expectations

0 = unacceptable

PERFORMANCE CRITERIA		MET	UNMET	COMMENTS	SCORE DEDUCTION
Demonstrates effective assessment of patient's pregnancy status.					
First incident written warning, second occurrence = 2 point deduction each successive occurrence will result in an additional 1 point deduction.					
Follows the repeat policy for necessary repeated images.					
First incident written warning, second occurrence = 2 point deduction each successive occurrence will result in an additional 2 point deduction.					
PERFORMANCE CRITERIA		SCORE		COMMENTS	
1	Demonstrates ability to evaluate requisition and physician's verbal/written orders to schedule and sequence exams appropriately.	/			
2	Identify the correct patient preparation needed for routine radiographic exams.	/			
3	Clean, stock and maintain radiographic rooms; maintaining basic stock supplies and overall appearance.	/			
4	Performs under direct supervision in surgical/sterile field environment. Practices appropriate dress and barrier protocols per facility.	/			
5	Evaluates image quality; demonstrates ability to critique radiographs and suggest appropriate corrections in technique or positioning with an accuracy of 80%.	/			
6	Demonstrates ability to modify radiation protection for pediatric patients.	/			
7	Utilizes effective gonadal shielding for patients.	/			
8	Applies methods of radiation protection for self during radiographic and/or fluoroscopic procedures.	/			
9	Protection for any additional persons in room.	/			
10	Shows evidence of collimation as appropriate for exams performed.	/			
	Average Score	/ %		Total all scores. Divide total by 40 (maximum possible score this standard). Note number as a percentage.	

RT 177 STANDARD IV: RADIOGRAPHIC PROCEDURES and PROFESSIONAL GROWTH:

Overall ability to learn and perform radiographic procedures under **direct/indirect supervision** while demonstrating progressive growth and willingness to develop new skills.

CONDITION: As measured by facility defined Room/Equipment sign off sheets and Performance Evaluation Sheets.

PERFORMANCE LEVEL: All criteria **shall be met** to a level in which (under a student’s scope of care), the radiographic quality of the exam will be diagnostic in accordance with department protocol.

*This standard should **measure student’s efforts** and progressing abilities to perform exams and NOT specifically upon the number of performance evaluations completed.

PERFORMANCE CRITERIA		MET	UNMET	COMMENTS	SCORE DEDUCTION
Turns in clinical documentation as required and on-time					
First incident written warning, second occurrence = 2 point deduction each successive occurrence will result in an additional 1 point deduction.					
PERFORMANCE CRITERIA		SCORE		COMMENTS	
1	Continue with satisfactory performance in all previously acquired skills.				
2	Complete Procedure Evaluations for 4 GI or GU procedures; to include overhead films, set technical factors, contrast preparation, utilize spot film device, include a logical film sequence. 4 GI or GU Procedure Evaluations Score = 4 3 GI or GU Procedure Evaluations Score = 2				
3	Successfully prepares surgical fluoroscopy equipment for Fluoroscopist, properly operates equipment as needed, identifies necessary views expected for routine surgical exams, i.e.; Cholecystectomy, ORIF extremities, etc.				
4	Completes Procedure Set up and Scout for contrast media studies as available at each institution, i.e.: Arthrogram, Lumbar puncture, ERCP, Joint Aspiration Facet injection				
5	Completes 1 Procedure Evaluation for trauma studies. 1 Procedure Evaluation = 4 points				
6	Performance of routine radiographic exams with decreasing need for direct supervision. Minimal supervision = score 4 Moderate supervision = score 2 Requires close supervision = score 0 Consistently requires close supervision = score (-2)				
7	Completes 42 Procedure Evaluation on the first year Procedure Eval. Record Score = 4; 37 completion Score = 2; less than 37 = 0				
	Average Score		%	Total all scores. Divide total by 28 (maximum possible score this standard). Note number as a percentage.	

CLINICAL OBJECTIVES RT 177

STANDARDS	*AVERAGE SCORE %	MULTIPLY BY	TOTAL SCORE
STANDARD I: Appearance, Dependability, Attitude, and Responsibility		Multiply by 15% (.15)	
STANDARD I: DEDUCTIONS			
STANDARD II: Professional Communication AND Patient Care		Multiply by 15% (.15)	
STANDARD III: Department Procedures and Radiation Protection		Multiply by 15% (.15)	
STANDARD III: DEDUCTIONS			
STANDARD IV: Radiographic Procedures and Professional Growth		Multiply by 55% (.55)	
STANDARD IV: DEDUCTIONS			
Should a documented counseling session occur for failure to meet the performance criteria of any clinical objective a score of (-2) will be assigned.			
Should a Critical Incident occur for failure to meet the performance criteria of any clinical objective a score of (-4) will be assigned.			
Final Grade: Total Average		(add weighted standards)	
Grading Scale:	A=100-90; B=89-80; C=79-70; D=69-60; F=below 60		
Grade Key: For the Final Grade the weighted score should <u>NOT</u> be rounded up.	4=Excellent; consistently at or above standards, or no more than 1 infraction. 3=Acceptable; frequently above standards, or no more than 2 infractions. 2=Meets only minimum standards. 1=Unacceptable; below expectations, or no more than 3 infractions. 0=Critical incident has been issued, or more than 3 infractions.		

***Note:** Each standard must also be passed with 80% or better, or the student will be subject to Program action.

Check one:

_____ Satisfactory course completion and progression to next clinical course based upon final score.

_____ Unsatisfactory course completion and recommend non-continuation of program.

Summarize student's progress for this clinical course (use narrative format).

Clinical Educator: Signature _____ Date: _____

College: Signature _____ Date: _____

Student _____ Date: _____

RT 271 CLINICAL OBJECTIVES

STANDARD I APPEARANCE, DEPENDABILITY, ATTITUDE AND RESPONSIBILITY: Develops a strong professional manner and courtesy; accepts and profits from constructive criticism; has the ability to work with others effectively; reliable and persistent in following policies and rules regarding professional appearance and attendance. **CONDITION:** As defined in Student Clinical Manual and clinical affiliate’s policies; while assigned to clinical duty.

PERFORMANCE LEVEL:

4 = Excellent; consistently at or above expectations
2 = Meets only minimum expectations

3 = Acceptable; frequently above standards
0 = unacceptable

PERFORMANCE CRITERIA		MET	UNMET	COMMENTS	POINTS DEDUCTION
Attendance is within program standards.					
2 absences = 2 point deduction ; 3 absences = 3 point deduction ; For each absence beyond 3 an additional 1 point deduction . Critical incident must be issued if absences have not been validated.					
Notifies Clinical Educator and Clinical Coordinator when unable to report to clinical site.					
First incident reminder of policy, second written warning, third occurrence = 2 point deduction each successive occurrence will result in an additional 1 point deduction .					
Reports for duty ready for training at the designated time.					
Tardies: After the first two a one point deduction , an additional point deduction for each successive occurrence .					
PERFORMANCE CRITERIA		SCORE		COMMENTS	
1	Follows dress code of school or clinical facility, as applicable; including ID badge and dosimeter.	/			
2	Presents a clean, neat appearance and practices good personal hygiene.	/			
3	Adheres to allotted times for breaks and lunch.	/			
4	Remains on duty for total hours assigned.	/			
5	Arranges with clinical educator for makeup hours and/or duty variations and documents it.	/			
6	Demonstrates knowledge of professional ethics in relationship to technologists and physicians.	/			
7	Demonstrates a spirit of cooperation, initiative and willingness to learn.	/			
8	Volunteers and willingly accepts assignments as given.	/			
9	Accepts criticism and strives to profit from it.	/			
10	Listens to and follows instructions, asks pertinent questions when uncertain.	/			
11	Makes appropriate judgment and asks for assistance when necessary, in relation to their level of knowledge and experience.	/			
12	Works efficiently, demonstrating logical exam sequence.	/			
Average Score		/ %		Total all scores. Divide total by 48 (maximum possible score this standard). Note number as a percentage.	

RT 271 - STANDARD II - PROFESSIONAL COMMUNICATION and PATIENT CARE

Understanding of duties and ability to interact with patients on an appropriate level of care. Skill in performing assigned tasks related to the physical care of patients.

CONDITION: As defined in Student Clinical Manual and clinical affiliate’s policies; while on duty.

PERFORMANCE LEVEL:

4 = Excellent; consistently at or above expectations

3 = Acceptable; frequently above standards

2 = Meets only minimum expectations

0 = unacceptable

PERFORMANCE CRITERIA		SCORE	COMMENTS
1	Demonstrates effective patient communication skills regarding: a. Exam preparation b. Procedure explanation c. Obtaining pertinent history	/	
2	Assists in obtaining patient consent according to department policies.	/	
3	Demonstrates concern for patient’s well-being, including comfort and modesty.	/	
4	Demonstrates appropriate patient/technologist relationship as observed in professional comments and conversations.	/	
5	Avoids discussion of diagnosis/prognosis, maintains patient confidentiality.	/	
6	Respects the patient as an individual.	/	
7	Demonstrates ability to maintain patency/flow of peripherals (i.e.: O ₂ , IV’s urinary catheter, etc.)	/	Competency documentation of all performance criteria required via Nursing/Patient Care sign-off sheet
8	Utilizes appropriate infection control measures to include; isolation protocols and standard precautions.	/	
9	Demonstrates aseptic technique in preparation of contrast media.	/	
10	Applies appropriate technique in preparation of sterile tray/field and assists as a team member in a sterile field environment.	/	
11	Practices proper patient moving and lifting technique with concern for patient and personal safety.	/	
12	Demonstrates ability to modify exams due to patient condition (i.e., patient’s limited mobility, gurney, age and/or portable exams).	/	
13	Demonstrates ability to respond to hospital codes (cardiac arrest, fire, earthquake, etc.) in accordance with clinical facility protocol.	/	
Average Score		%	Total all scores. Divide total by 60 (maximum possible score this standard). Note number as a percentage.

RT 271 - STANDARD III - DEPARTMENT PROCEDURES and RADIATION PROTECTION

Demonstrates knowledge of radiation protection for patients, self and staff.

CONDITION: Speed in mastering and understanding new work routines and methods.

PERFORMANCE LEVEL: Able to perform duties in accordance with department protocol with **moderate supervision**.

4 = Excellent; consistently at or above expectations

3 = Acceptable; frequently above standards

2 = Meets only minimum expectations

0 = unacceptable

PERFORMANCE CRITERIA		MET	UNMET	COMMENTS	SCORE DEDUCTION
Demonstrates effective assessment of patient's pregnancy status.					
First incident written warning, second occurrence = 2 point deduction each successive occurrence will result in an additional 1 point deduction.					
Follows the repeat policy for necessary repeated images.					
First incident written warning, second occurrence = 2 point deduction each successive occurrence will result in an additional 2 point deduction.					
PERFORMANCE CRITERIA		SCORE		COMMENTS	
1	Processing of exam requisition and related department documents.	/			
2	Performs basic PACS archiving duties and post digital imaging processing.	/			
3	Understands workflow and exam scheduling; participates in Reception area rotation.	/			
4	Clean, stock and maintain radiographic rooms; maintaining basic stock supplies and overall appearance.	/			
5	Demonstrates preparation of appropriate contrast media for contrast procedures.	/			
6	Participates in departmental QC program as defined by facility designed check off sheet which could include: Fluoroscopic output monitoring	/			
7	Demonstrates advanced ability with 85% accuracy to evaluate image quality to include recognition of: Positioning errors, Technical factors, and artifacts.	/			
8	Utilizes effective gonadal shielding for patients.	/			
9	Applies methods of radiation protection for self during radiographic and/or fluoroscopic procedures.	/			
10	Protection for any additional persons in room.	/			
11	Shows evidence of collimation as appropriate for exams performed.	/			
Average Score		/ %		Total all scores. Divide total by 44 (maximum possible score this standard). Note number as a percentage.	

RT 271 STANDARD IV: RADIOGRAPHIC PROCEDURES and PROFESSIONAL GROWTH:

Overall ability to learn and perform radiographic procedures under **direct/indirect supervision** while demonstrating progressive growth and willingness to develop new skills

CONDITION: As measured by facility defined Room/Equipment sign off sheets and Performance Evaluation Sheets.

PERFORMANCE LEVEL: All criteria **shall be met** to a level in which (under a student’s scope of care), the radiographic quality of the exam will be diagnostic in accordance with department protocol.

*This standard should **measure student’s efforts** and progressing abilities to perform exams and NOT specifically upon the number of performance evaluations completed.

PERFORMANCE CRITERIA		MET	UNMET	COMMENTS	SCORE DEDUCTION
Turns in clinical documentation as required and on-time					
First incident written warning, second occurrence = 2 point deduction each successive occurrence will result in an additional 1 point deduction .					
PERFORMANCE CRITERIA		SCORE		COMMENTS	
1	Set technical factors on radiographic control panel.	/			
2	Participates as an effective team member during routine fluoroscopic procedures.				
3	Successfully demonstrates (70% or better performance), all previously learned skills from first year clinical courses .				
4	Completes 3 Procedure Evaluations of the cranial/facial bones: 3 Procedure Evaluations = score 4 2 Procedure Evaluations = score 2 Less than 2 Procedure Evals = 0				
5	Completes 4 Procedure Evaluations on the following exams: Pelvis/Hip, Shoulder, Ribs, and trauma shoulder: 4 Procedure Evaluations = score 4 3 Procedure Evaluations = score 2 2 or less Procedure Evaluations = score 0				
6	Completes 3 Procedure Evaluations of the bony thorax: Sternum, Scapula, Clavicle, and Acromioclavicular joints: 3 Procedure Evaluations = score 4 2 Procedure Evaluations = score 2 1 Procedure Evaluation = score 1				
7	Completes 3 Procedure Evaluations for Minor Special Procedures under direct/indirect supervision. 3 Procedure Evaluations = score 4 2 Procedure Evaluations = score 2 1 Procedure Evaluation = score 1				
8	Performs routine portable and surgical procedures.				
	Average Score	%		Total all scores. Divide total by 32 (maximum possible score this standard). Note number as a percentage.	

CLINICAL OBJECTIVES RT 271

STANDARDS	*AVERAGE SCORE %	MULTIPLY BY	TOTAL SCORE
STANDARD I: Appearance, Dependability, Attitude, and Responsibility		Multiply by 15% (.15)	
STANDARD I: DEDUCTIONS			
STANDARD II: Professional Communication AND Patient Care		Multiply by 15% (.15)	
STANDARD III: Department Procedures and Radiation Protection		Multiply by 15% (.15)	
STANDARD III: DEDUCTIONS			
STANDARD IV: Radiographic Procedures and Professional Growth		Multiply by 55% (.55)	
STANDARD IV: DEDUCTIONS			
Should a documented counseling session occur for failure to meet the performance criteria of any clinical objective a score of (-2) will be assigned.			
Should a Critical Incident occur for failure to meet the performance criteria of any clinical objective a score of (-4) will be assigned.			
Final Grade: Total Average		(add weighted standards)	
Grading Scale:	A=100-90; B=89-80; C=79-70; D=69-60; F=below 60		
Grade Key: For the Final Grade the weighted score should <u>NOT</u> be rounded up.	4=Excellent; consistently at or above standards, or no more than 1 infraction. 3=Acceptable; frequently above standards, or no more than 2 infractions. 2=Meets only minimum standards. 1=Unacceptable; below expectations, or no more than 3 infractions. 0=Critical incident has been issued, or more than 3 infractions.		

***Note:** Each standard must also be passed with 80% or better, or the student will be subject to Program action.

Check one:

Satisfactory course completion and progression to next clinical course based upon final score.

Unsatisfactory course completion and recommend non-continuation of program.

Summarize student's progress for this clinical course (use narrative format).

Clinical Educator: Signature _____ Date: _____

College: Signature _____ Date: _____

Student _____ Date: _____

RT 276 CLINICAL OBJECTIVES

STANDARD I APPEARANCE, DEPENDABILITY, ATTITUDE AND RESPONSIBILITY: Develops a strong professional manner and courtesy; accepts and profits from constructive criticism; has the ability to work with others effectively; reliable and persistent in following policies and rules regarding professional appearance and attendance. **CONDITION:** As defined in Student Clinical Manual and clinical affiliate’s policies; while assigned to clinical duty.

PERFORMANCE LEVEL:

4 = Excellent; consistently at or above expectations
2 = Meets only minimum expectations

3 = Acceptable; frequently above standards
0 = unacceptable

PERFORMANCE CRITERIA		MET	UNMET	COMMENTS	POINTS DEDUCTION
Attendance is within program standards.					
2 absences = 2 point deduction ; 3 absences = 3 point deduction ; For each absence beyond 3 an additional 1 point deduction .					
Notifies Clinical Educator and Clinical Coordinator when unable to report to clinical site.					
First incident reminder of policy, second written warning and 2 point deduction each successive occurrence results in an additional 1 point deduction .					
Reports for duty ready for training at the designated time.					
Tardies: After the first two a one point deduction , an additional point deduction for each successive occurrence .					
PERFORMANCE CRITERIA		SCORE		COMMENTS	
1	Follows dress code of school or clinical facility, as applicable; including ID badge and dosimeter.	/			
2	Adheres to allotted times for breaks and lunch.	/			
3	Remains on duty for total hours assigned.	/			
4	Demonstrates knowledge of professional ethics in relationship to technologists and physicians.	/			
5	Demonstrates a spirit of cooperation, initiative and willingness to learn.	/			
6	Volunteers and willingly accepts assignments as given.	/			
7	Makes appropriate judgment and asks for assistance when necessary, in relation to their level of knowledge and experience.	/			
Average Score		/ %		Total all scores. Divide total by 28 (maximum possible score this standard). Note number as a percentage.	

RT 276 - STANDARD II - PROFESSIONAL COMMUNICATION and PATIENT CARE

Understanding of duties and ability to interact with patients on an appropriate level of care. Skill in performing assigned tasks related to the physical care of patients.

CONDITION: As defined in Student Clinical Manual and clinical affiliate’s policies; while on duty.

PERFORMANCE LEVEL:

4 = Excellent; consistently at or above expectations

2 = Meets only minimum expectations

3 = Acceptable; frequently above standards

0 = unacceptable

PERFORMANCE CRITERIA		SCORE	COMMENTS
1	Demonstrates effective patient communication skill.	/	
2	Assists in obtaining patient consent according to department policies.	/	
3	Demonstrates concern for patient’s well-being while respecting them as an individual.	/	
4	Utilizes appropriate infection control measures to include; isolation protocols and standard precautions.	/	
5	Demonstrates aseptic technique in preparation of contrast media.	/	
6	Applies appropriate technique in preparation of sterile tray and assists in sterile field environment.	/	
Average Score		%	Total all scores. Divide total by 24 (maximum possible score this standard).

RT 276 - STANDARD III - DEPARTMENT PROCEDURES and RADIATION PROTECTION

Demonstrates knowledge of radiation protection for patients, self and staff.

CONDITION: Speed in mastering and understanding new work routines and methods.

PERFORMANCE LEVEL: Able to perform duties in accordance with department protocol with **moderate supervision**.

4 = Excellent; consistently at or above expectations

3 = Acceptable; frequently above standards

2 = Meets only minimum expectations

0 = unacceptable

PERFORMANCE CRITERIA		MET	UNMET	COMMENTS	SCORE DEDUCTION
Demonstrates effective assessment of patient's pregnancy status.					
First incident written warning and 2 point deduction each successive occurrence will result in an additional 2 point deduction					
Follows the repeat policy for necessary repeated images.					
First incident written warning and 2 point deduction each successive occurrence will result in an additional 2 point deduction					
PERFORMANCE CRITERIA		SCORE		COMMENTS	
1	Processing of exam requisition and related department documents.	/			
2	Performs basic PACS archiving duties and post digital imaging processing.	/			
3	Demonstrates preparation of appropriate contrast media for contrast procedures.	/			
4	Demonstrates advanced ability with 85% accuracy to evaluate image quality to include recognition of: Positioning errors, Technical factors, and artifacts	/			
5	Utilizes effective gonadal shielding for patients.	/			
6	Shows evidence of collimation as appropriate for exams performed.	/			
	Average Score	/ %		Total all scores. Divide total by 24 (maximum possible score this standard). Note number as a percentage.	

RT 276 STANDARD IV: RADIOGRAPHIC PROCEDURES and PROFESSIONAL GROWTH:

Overall ability to learn and perform radiographic procedures under **direct/indirect supervision** while demonstrating progressive growth and willingness to develop new skills

CONDITION: As measured by facility defined Room/Equipment sign off sheets and Performance Evaluation Sheets.

PERFORMANCE LEVEL: All criteria **shall be met** to a level in which (under a student's scope of care), the radiographic quality of the exam will be diagnostic in accordance with department protocol.

*This standard should **measure student's efforts** and progressing abilities to perform exams and NOT specifically upon the number of performance evaluations completed.

PERFORMANCE CRITERIA		SCORE	COMMENTS
1	Completes Procedure Evaluations of portable exams from the following: Chest, Abdomen, Extremities Portable chest & 2 other evals = 4 Portable chest & 1 other evals = 2 Portable chest only = 1.	/	
2	Completes portable exams in special care units under direct supervision. Portable chest & 2 other evals = 4 Portable chest & 1 other evals = 2 Portable chest only = 1	/	
3	Completed Procedure Evaluations in routine surgical procedures under direct supervision. 2 Procedure Evaluations = score 4 1 Procedure Evaluations = score 2	/	
4	Completed 3 Procedure Evaluations of different radiographic C-Arm procedures. 3 Procedure Evaluations = score 4 2 Procedure Evaluations = score 2 1 Procedure Evaluation = score 1	/	
5	Participates as a team member in trauma radiography, pediatric, and minor contrast examinations as appropriate and available.	/	
	Average Score	%	Total all scores. Divide total by 20 (maximum possible score this standard). Note number as a percentage.

CLINICAL OBJECTIVES RT 276

STANDARDS	*AVERAGE SCORE %	MULTIPLY BY	TOTAL SCORE
STANDARD I: Appearance, Dependability, Attitude, and Responsibility		Multiply by 15% (.15)	
STANDARD I: DEDUCTIONS			
STANDARD II: Professional Communication AND Patient Care		Multiply by 15% (.15)	
STANDARD III: Department Procedures and Radiation Protection		Multiply by 15% (.15)	
STANDARD III: DEDUCTIONS			
STANDARD IV: Radiographic Procedures and Professional Growth		Multiply by 55% (.55)	
STANDARD IV: DEDUCTIONS			
Should a documented counseling session occur for failure to meet the performance criteria of any clinical objective a score of (-2) will be assigned.			
Should a Critical Incident occur for failure to meet the performance criteria of any clinical objective a score of (-4) will be assigned.			
Final Grade: Total Average		(add weighted standards)	
Grading Scale:	A=100-90; B=89-80; C=79-70; D=69-60; F=below 60		
Grade Key: For the Final Grade the weighted score should <u>NOT</u> be rounded up.	4=Excellent; consistently at or above standards, or no more than 1 infraction. 3=Acceptable; frequently above standards, or no more than 2 infractions. 2=Meets only minimum standards. 1=Unacceptable; below expectations, or no more than 3 infractions. 0=Critical incident has been issued, or more than 3 infractions.		

***Note:** Each standard must also be passed with 80% or better, or the student will be subject to Program action.

Check one:

_____ Satisfactory course completion and progression to next clinical course based upon final score.

_____ Unsatisfactory course completion and recommend non-continuation of program.

Summarize student's progress for this clinical course (use narrative format).

Clinical Educator: _____ Signature _____ Date: _____

College: _____ Signature _____ Date: _____

Student _____ Date: _____

RT 277 CLINICAL OBJECTIVES

STANDARD I APPEARANCE, DEPENDABILITY, ATTITUDE AND RESPONSIBILITY: Develops a strong professional manner and courtesy; accepts and profits from constructive criticism; has the ability to work with others effectively; reliable and persistent in following policies and rules regarding professional appearance and attendance.

CONDITION: As defined in Student Clinical Manual and clinical affiliate's policies; while assigned to clinical duty.

PERFORMANCE LEVEL:

4 = Excellent; consistently at or above expectations

3 = Acceptable; frequently above standards

2 = Meets only minimum expectations

0 = unacceptable

PERFORMANCE CRITERIA		MET	UNMET	COMMENTS	POINTS DEDUCTION
Attendance is within program standards.					
2 absences = 2 point deduction ; 3 absences = 3 point deduction ; For each absence beyond 3 an additional 1 point deduction . Critical incident must be issued if absences have not been validated.					
Notifies Clinical Educator and Clinical Coordinator when unable to report to clinical site.					
First incident reminder of policy, second written warning, third occurrence = 2 point deduction each successive occurrence will result in an additional 1 point deduction .					
Reports for duty ready for training at the designated time.					
Tardies: After the first two a one point deduction , an additional point deduction for each successive occurrence .					
PERFORMANCE CRITERIA		SCORE		COMMENTS	
1	Follows dress code of school or clinical facility, as applicable; including ID badge and dosimeter.	/			
2	Presents a clean, neat appearance and practices good personal hygiene.	/			
3	Adheres to allotted times for breaks and lunch.	/			
4	Remains on duty for total hours assigned.	/			
5	Arranges with clinical educator for makeup hours and/or duty variations and documents it.	/			
6	Demonstrates knowledge of professional ethics in relationship to technologists and physicians.	/			
7	Demonstrates a spirit of cooperation, initiative and willingness to learn.	/			
8	Volunteers and willingly accepts assignments as given.	/			
9	Accepts criticism and strives to profit from it.	/			
10	Listens to and follows instructions, asks pertinent questions when uncertain.	/			
11	Makes appropriate judgment and asks for assistance when necessary, in relation to their level of knowledge and experience.	/			
12	Works efficiently, demonstrating logical exam sequence.	/			
Average Score		/ %		Total all scores. Divide total by 48 (maximum possible score this standard). Note number as a percentage.	

RT 277 - STANDARD II - PROFESSIONAL COMMUNICATION and PATIENT CARE

Understanding of duties and ability to interact with patients on an appropriate level of care. Skill in performing assigned tasks related to the physical care of patients.

CONDITION: As defined in Student Clinical Manual and clinical affiliate’s policies; while on duty.

PERFORMANCE LEVEL:

4 = Excellent; consistently at or above expectations

3 = Acceptable; frequently above standards

2 = Meets only minimum expectations

0 = unacceptable

PERFORMANCE CRITERIA		SCORE	COMMENTS
1	Demonstrates effective patient communication skills regarding: a. Exam preparation b. Procedure explanation c. Obtaining pertinent history	/	
2	Assists in obtaining patient consent according to department policies.	/	
3	Demonstrates concern for patient’s well-being, including comfort and modesty.	/	
4	Demonstrates appropriate patient/technologist relationship as observed in professional comments and conversations.	/	
5	Avoids discussion of diagnosis/prognosis, maintains patient confidentiality.	/	
6	Respects the patient as an individual.	/	
7	Demonstrates ability to maintain patency/flow of peripherals (i.e.: O ₂ , IV’s urinary catheter, etc.).	/	Competency documentation of all performance criteria required via Nursing/Patient Care sign-off sheet
8	Utilizes appropriate infection control measures to include; isolation protocols and standard precautions.	/	
9	Demonstrates aseptic technique in preparation of contrast media.	/	
10	Applies appropriate technique in preparation of sterile tray/field and assists as a team member in a sterile field environment.	/	
11	Practices proper patient moving and lifting technique with concern for patient and personal safety.	/	
12	Demonstrates ability to modify exams due to patient condition (i.e., patient’s limited mobility, gurney, age and/or portable exams).	/	
13	Demonstrates ability to respond to hospital codes (cardiac arrest, fire, earthquake, etc.) in accordance with clinical facility protocol.	/	
Average Score		/ %	Total all scores. Divide total by 60 (maximum possible score this standard). Note number as a percentage.

RT 277 - STANDARD III - DEPARTMENT PROCEDURES and RADIATION PROTECTION

Demonstrates knowledge of radiation protection for patients, self and staff.

CONDITION: Speed in mastering and understanding new work routines and methods.

PERFORMANCE LEVEL: Able to perform duties in accordance with department protocol with **moderate supervision**.

4 = Excellent; consistently at or above expectations

3 = Acceptable; frequently above standards

2 = Meets only minimum expectations

0 = unacceptable

PERFORMANCE CRITERIA		MET	UNMET	COMMENTS	SCORE DEDUCTION
Demonstrates effective assessment of patient's pregnancy status.					
First incident written warning, second occurrence = 2 point deduction each successive occurrence will result in an additional 1 point deduction.					
Follows the repeat policy for necessary repeated images.					
First incident written warning, second occurrence = 2 point deduction each successive occurrence will result in an additional 2 point deduction					
PERFORMANCE CRITERIA		SCORE		COMMENTS	
1	Processing of exam requisition and related department documents.	/			
2	Performs basic PACS archiving duties and post digital imaging processing.	/			
3	Understands workflow and exam scheduling; participates in Reception area rotation.	/			
4	Clean, stock and maintain radiographic rooms; maintaining basic stock supplies and overall appearance.	/			
5	Demonstrates preparation of appropriate contrast media for contrast procedures.	/			
6	Participates in departmental QC program as defined by facility designed check off sheet which could include: Fluoroscopic output monitoring	/			
7	Demonstrates advanced ability with 95% accuracy to evaluate image quality to include recognition of: Positioning errors, Technical factors, and artifacts.	/			
8	Utilizes effective gonadal shielding for patients.	/			
9	Applies methods of radiation protection for self during radiographic and/or fluoroscopic procedures.	/			
10	Demonstrates the ability to adhere to department protocols in handling chemical/hazardous materials utilizing the MSDS (material safety data sheets).	/			
11	Shows evidence of collimation as appropriate for exams performed.	/			
	Average Score	/ %		Total all scores. Divide total by 44 (maximum possible score this standard). Note number as a percentage.	

RT 277 STANDARD IV: RADIOGRAPHIC PROCEDURES and PROFESSIONAL GROWTH:

Overall ability to learn and perform radiographic procedures under **indirect supervision** while demonstrating progressive growth and willingness to develop new skills

CONDITION: As measured by facility defined Room/Equipment sign off sheets and Performance Evaluation Sheets.

PERFORMANCE LEVEL: All criteria **shall be met** to a level in which (under a student’s scope of care), the radiographic quality of the exam will be diagnostic in accordance with department protocol.

*This standard should **measure student’s efforts** and progressing abilities to perform exams and NOT specifically upon the number of performance evaluations completed.

PERFORMANCE CRITERIA		MET	UNMET	COMMENTS	SCORE DEDUCTION		
Turns in clinical documentation as required and on-time							
First incident written warning, second occurrence = 2 point deduction each successive occurrence will result in an additional 1 point deduction							
PERFORMANCE CRITERIA		SCORE		COMMENTS			
1	Demonstrates proficiency with all previously learned skills in radiographic and fluoroscopic procedures <u>under indirect supervision.</u>	/					
2	Completes the 3 required geriatric examinations listed in the 2 nd Year Clinical Evaluation List All 3 exams have to be completed						
3	Completes Procedure Evaluations in pediatric radiography, including portable procedures, chest and extremities. Chest & 2 others = 4 Chest & 1 other = 2 Chest only = 1						
4	Completes Procedure Evaluations in advanced level trauma exams under supervision as directed by program/department guidelines. 3 Procedure Evaluations = score 4 2 Procedure Evaluations = score 2 1 Procedure Evaluation = score 1					The level of supervision must adhere to program / JRCERT policy.	
5	Recognizes gross radiographic pathologies and modifies exam in relation to pertinent clinical factors.						
6	Has participated in optional clinical rotations: MRI/CT/Nuc Med/U.S./Rad Therapy/Mammo ³⁵ / ₁₇ Or other entry level staff technologist task(s). Please identify rotation(s) elected.					Note: Maximum 4 pts for this category regardless of the number of optional rotations selected. If no optional rotations selected, score zero.	
7	Completion of 95% of exams identified on second year Procedure Evaluation Record. *55 = score 4 54-51 = score 3 less than 51 = score 0 *Lab/clinical simulations may not account for more than 10% of total proficiency sign off.					Note: If score 0 is given, this clinical course will be extended until ARRT core competencies are completed.	
8	Ability to function in an environment that includes varying and unpredictable or crisis situations while exercising interpersonal and critical thinking skills.						

9	Performance of ARRT required radiological procedures with decreasing need for supervision. Minimal supervision = score 4 Moderate supervision = score 3 Requires close supervision = score 0		Note: If score 0 is given, this clinical course will be extended until ARRT procedures are met with minimal supervision.
1 0	Demonstrates competency in ARRT required general patient care procedures: 1) CPR 2) Vital signs (BP, pulse, respiration, temperature 3) *Venipuncture and knowledge of emergency conditions as related to contrast media administration 4) O ₂ administration 5) Patient transfer/handling 6) IV care and related equipment 7) Proper sterile and aseptic technique		*Note: Venipuncture as completed per State statute. Note: If score 0 is given, this clinical course will be extended until ARRT patient care competencies are met.
1 1	Demonstrates with minimal supervision computer literacy as related to dept protocols including imaging, processing, requisition handling etc. Score 4 if minimal supervision Score 2 if moderate supervision Score 0 if unable to perform required functions		
1 2	Completion of required clinical hours as defined in the Radiologic Technology Program. Completion of hours = score 4 Non-completion of hours = score 0		Note: If score 0 is given, this clinical course will be extended until ARRT patient care competencies are met.
	Average Score	%	Total all scores. Divide total by 48 (maximum possible score this standard). Note number as a percentage.

CLINICAL OBJECTIVES RT 277

STANDARDS	*AVERAGE SCORE %	MULTIPLY BY	TOTAL SCORE
STANDARD I: Appearance, Dependability, Attitude, and Responsibility		Multiply by 15% (.25)	
STANDARD I: DEDUCTIONS			
STANDARD II: Professional Communication AND Patient Care		Multiply by 15% (.15)	
STANDARD III: Department Procedures and Radiation Protection		Multiply by 15% (.15)	
STANDARD III: DEDUCTIONS			
STANDARD IV: Radiographic Procedures and Professional Growth		Multiply by 55% (.55)	
STANDARD IV: DEDUCTIONS			
Should a documented counseling session occur for failure to meet the performance criteria of any clinical objective a score of (-2) will be assigned.			
Should a Critical Incident occur for failure to meet the performance criteria of any clinical objective a score of (-4) will be assigned.			
Final Grade: Total Average		(add weighted standards)	
Grading Scale:	A=100-90; B=89-80; C=79-70; D=69-60; F=below 60		
Grade Key: For the Final Grade the weighted score should <u>NOT</u> be rounded up.	4=Excellent; consistently at or above standards, or no more than 1 infraction. 3=Acceptable; frequently above standards, or no more than 2 infractions. 2=Meets only minimum standards. 1=Unacceptable; below expectations, or no more than 3 infractions. 0=Critical incident has been issued, or more than 3 infractions.		

***Note:** Each standard must also be passed with 80% or better, or the student will be subject to Program action.

Check one:

Satisfactory course completion and recommend program completion based on clinical competence.

Summarize student's progress for this clinical course (use narrative format).

Clinical Educator: Signature _____ Date: _____

College: Signature _____ Date: _____

Student _____ Date: _____

RT 276/277

PEDIATRIC RADIOLOGY ROTATION –

RADIOGRAPHIC PROCEDURES –

Pediatric Exams: Demonstrate ability to perform pediatric under direct supervision

CONDITION: Measured by facility defined room/equipment signoff and performance evaluation

PERFORMANCE LEVEL: No more than one infraction (score 3)

No more than two infractions to meet standard (score 2)

Three infractions will result in unsatisfactory grade (score 1)

Four or more infractions requires a critical incident (score 0)

PERFORMANCE LEVEL		SCORE	COMMENTS
1	Introduction to child (age appropriate manner)		
2	Provides assurance to parent regarding child's exam		
3	Provides general information to parent regarding child's exam		
4	Demonstrates sensitivity toward parent/child's apprehension of exam		
5	Can explain procedure to the child and the parents in the appropriate vocabulary		
6	Can describe the policy for procedural immobilization		
7	Assessment of patient condition		
8	Demonstrates use of: a. Pigg-o-Stat b. Mummy blanket wrap c. Sponges, sandbags and head holders d. Lead aprons, waist shields e. Parental involvement (if applicable) f. Cradle immobilization g. Immobilization band		
9	Identifies location of Pediatric Procedure Manual		
10	Can explain after-care instructions (if applicable)		
11	Can provide care according to the patient's growth and development: Newborn - 1 year, keep warm 2 to 5 years - reassurance to child 6 years and up - provide explanation of exam		
12	Can demonstrate the equipment located on the pediatric crash cart		
13	Demonstrate use of pediatric oxygen masks with tubing		

14	Can locate the pediatric B/P equipment and cuff. Patient is never left unattended					
15	Can locate the suction catheters and tubing for infants and children					
16	Applies appropriate methods of radiation protection/gonadal shielding					
17	Can locate the infant and child ambu bags					
18	Identifies location of "Code Blue" button					
19	Demonstrates use of nasal aspirator					
20	Achieved proficiency of routine pediatric imaging under direct supervision. Practicum has been signed off. 4 practicums = score 3 2 practicums = score 2 1 practicums = score 1					
21	Achieved proficiency of specialized pediatric imaging under direct supervision. Practicum has been signed off. 3 practicums = score 3 2 practicums = score 2 1 practicum = score 1					
22	Demonstrates professional behavior, spirit of cooperation, initiative and willingness to learn					
Average Score				% Total all scores. Divide total by 72 (maximum possible score this standard). Note number as a percentage. Minimum passing score for clinical rotation is 70%.		

Check one:

- Satisfactory completion of pediatric imaging rotation.
 Unsatisfactory completion of pediatric imaging rotation. Recommend additional clinical Experience.

Summarize student's performance for clinical assignment.

Signature of Evaluator

Date _____

Student's signature

Student comments:

**RADIOLOGIC TECHNOLOGY PROGRAM CLINICAL CALENDAR
SCHOOL YEAR 2020 - 2021**

NOTE: This schedule assumes the clinical week **starts on Monday** and concludes the following Sunday. If your clinical scheduling does not follow this format, some adjustments may be necessary. **All stated hours and dates are subject to change.**

Fall 2020

- Aug. 25 (Tues) -- 2nd year students start clinical. Assigned days are **Tues., Thur., Fri. plus 8 hrs arranged Sat or Sun**
- Sept. 7 (Mon) -- **Holiday (Labor Day)** - all 2nd year students are to be **scheduled the regular 32 hrs** for this week.
- Sep 30 (Wed) -- **Advisory Committee Meeting**
- Oct. 6 (Tues) -- Projected : Coast Day at OCC. 2nd year students off one day for activities on campus.
- Oct. 15(**Thurs**) -- Reception for 1st yr students and clinical educators, **1:30pm, Al Sc 103 (LAB)**
- Oct. 19(Mon) -- 1st year students start clinical. Assigned days are **Mon. and Wed.** Fall mid-semester evaluations for 2nd year students are due this week
- Nov. 11 (Wed.)-- **Holiday (Veteran's Day observed)** – 1st year students 8 hours credit
- Nov. 26- Nov 29 -- **Holiday (Thanksgiving)** - 2nd year students are scheduled only **Tues (11/24)** and give 8 hrs credit for **Thu 11/26, Fri 11/27 and Sat 11/28.** 1st year students have regular Mon and Wed schedule. **Campus closed 11/26 – 11/29.**
- Dec. 2 (Wed) -- **Last day of clinical for 1st year students.** All make-up time must be completed by this date. Final clinical grades are due.
- Dec. 6 (Sun) -- **Last day of clinical for 2nd year students.** All make-up time must be completed by this date. Final clinical grades are due. **Must do 32hr wk**
- Dec. 7 - 8 (M/T) -- **Clinical final exam** at OCC. Give **16hrs clinical credit** (Dec 9 & 10) on Dec timesheet for these days.
- Dec. 7 - 11 -- **Final exams at OCC.** No students scheduled.

INTERSESSION 2021 (Note: both 1st and 2nd yr students must be scheduled for a 4 week/ 32hrs week

- Jan. 4 (Mon) -- Intersession starts for 1st and 2nd yrs, 24 hours scheduled clinical
- Jan 18 (Mon) -- **Holiday (King holiday)** all students scheduled 24 hours this week give 8 hours for the holiday. **Campus closed**
- Jan 27 (Wed) -- Last clinical day for both 1st and 2nd yr students.
- Jan 28 (Thurs) -- **Clinical final** for all students at OCC in the am - **8 hrs clinical credit on intersession timesheet** given for this day.

CONTINUED ON REVERSE SIDE

SPRING 2021

- Feb 1 (Mon) -- 2nd year students start clinical. Assigned days are **Mon, Wed, and eight hours Sat or Sun, 24 hrs per week** **Note: on campus classes are Tues and Thurs**).
- Feb 2 (Tues) -- 1st year students start clinical. Assigned days are **Tues, Thurs and Fri (24 hr week)**.
- Feb. 12 (Fri) -- Holiday (Lincoln's B-Day) - **all students scheduled off. All students get 8 hrs credit this day (2/13) and do 16 hr/wk no weekend days assigned. Campus closed**
- Feb. 15 (Mon) -- **Holiday** (Washington's B-Day) - 2nd year students scheduled off, only 16 hrs this week but get **8 hrs clinical for this day (2/16). Campus closed**
- Feb 18 (Thu) -- Flex day, 1st yrs get 8 hours clinical credit. **Campus closed**
- Mar. 19 (Fri) -- Mid **semester evaluations** for both 1st and 2nd year students are due this week.
- Mar 16 (Tues)-- Tentative date to be announced for Spring Coast Day. Both 1st and 2nd year students off one day.
- March 29 - -- **Spring Break** - no students scheduled from Mon through Sunday
- April 4
- May 6 -- **Clinical Educators Meeting and New Student Orientation**
- May 21 (Fri) -- **Last clinical day for all students.** All make-up time must be completed by this date. Final clinical grades are due. **2nd yr students must do 24 hr wk and can do final day as late as Sunday (5/17).**
- May 25-26 (T/W) **Clinical final exam** at OCC. Give **16hrs credit (5/26 & 27) on May timesheet.** Specific day scheduled for 1st and 2nd yr will be announced.
- May 25-27 -- **Final exams at OCC.** No students schedule for clinical..
- May 25 (Tues) -- Tentative date for SAHP Pinning Ceremony and Rad Tech Awards 5:00 – 7:30pm at Orange Coast College. More specifics to be announced.
- May 24 (Mon) -- **MEMORIAL DAY**

SUMMER SESSION 2021 A minimum of two weekend days and four evening (no later than 9PM) will be scheduled for all students.
32 hours/week are to be mutually arranged between students and clinical

June 14, 2019 -- First day of summer clinical. **1st yr students only - will do 32 hours/wk for 8 weeks.**

July 5, 2019 (Mon) Clinical credit for the day, students scheduled 24 hours for the week. No weekend hours this week.

OFFICIAL DATES FOR SUMMER WILL BE ANNOUNCED WHEN AVAILABLE

- (Mon) -- **Last clinical day for 1st year students.** All make-up time must be completed by this date. Final clinical grades are due.
- (Tues) -- **Clinical final** at OCC for 1st year students - **give 24 hours credit** on August timesheet for Tues, Wed, and Thu.

CLINICAL FINAL FORMAT

Below you will find listed the requirements for the paperwork necessary to complete your present clinical assignment. This paperwork is to be submitted in the specific order listed and delivered to OCC by each individual student for evaluation at the designated clinical exam. A clinical grade will be issued upon review and satisfactory completion of these documents. **Incomplete submission of documents will result in a non-passing clinical grade.**

FALL AND SPRING SEMESTER

1. Master Time Sheet: **Copy**, dated and signed. Complete absences/tardies section.
2. Clinical Attendance Sheet: Originals, signed, and totaled.
3. Anecdotal Notes: Original, “greenies”, mounted on correct page, submit only if notes have occurred during the term.
4. Critical Incident Report: Original, submit only if form has been issued.
5. Evaluations: Original, submit only if clinical site does independent evaluation of student. Originals of Mid-semester evaluations go here (both forms).
6. Monthly Clinical Experience Log: Print hard copy of “yearly total” page of excel file (one or two pages preferred).
7. Daily Clinical Logs: Original, daily sheets completed and sorted by date.
8. Student Orientation Sheet: To clinical facility (Fall semester only).
9. Procedure Evaluation Forms: Original, blue evaluation form (**completed only**). RT 176 Nursing/Patient Care objectives go here (original).
10. Procedure Evaluation Checklist: **Copy**, all entries signed and dated.
11. Clinical Objectives: Original, signed by clinical educator, reviewed with student.
12. Student Course and/or Clinical Site Evaluations: Must be completed on-line by the end of the semester. If not completed clinical grade will not be issued. Web address will be provided in class.

INTERSESSION

1. Master Time Sheet: **Copy**, dated and signed. Complete absences/tardies section.
2. Clinical Attendance Sheet: Originals, signed, and totaled.
3. Anecdotal Notes: Original, submit only if student has “greenies”.
4. Critical Incident Report: Original, submit only if form has been issued.
5. Monthly Clinical Experience Log: Print hard copy of “yearly total” page of excel file (one or two pages preferred).
6. Procedure Evaluation Forms: Original, blue evaluation form (**completed only**)
7. Daily Clinical Log: Original, daily sheets completed and sorted by date.
8. Clinical Objectives: Original, signed by clinical educator, reviewed with student.

SUMMER SESSION

1. Master Time Sheet: Original, dated and signed. Complete absences/tardies section.
2. Clinical Attendance Sheet: Originals, signed, and totaled.
3. Anecdotal Notes: Original, submit only if student has “greenies”.
4. Critical Incident Report: Original, submit only if form has been issued.
5. Evaluations: Original, submit only if clinical site does independent evaluation of student.
6. Monthly Clinical Experience Log: Print hard copy of “yearly total” page of excel file (one or two pages preferred).
7. Daily Clinical Logs: Original, daily sheets completed and sorted by date.
10. Procedure Evaluation Forms: Original, blue evaluation form (**all even if uncompleted**)
11. 1st year Performance Evaluation Checklist: Original, all entries signed and dated.
13. Clinical Objectives: Original, signed by clinical educator, reviewed with student.
14. Repeat Rate Analysis and Log: Original
15. **Separate copies** of the following: #1) master time sheet #2) master exam sheet with 1st yr totals #3) 1st yr competency list. These are to be **submitted to your 2nd yr clinical educator** at the start of the new clinical assignment.
16. Dosimeters(s) from summer clinical assignment
17. Student Course and/or Clinical Site Evaluations: Must be completed on-line by the end of the semester. If not completed clinical grade will not be issued. Web address will be provided in class.

FINAL SPRING SEMESTER – SECOND YEAR STUDENTS ONLY

1. Master Time Sheet: Original, dated and signed. Complete absences/tardies section.
2. Clinical Attendance Sheet: Originals, signed, and totaled.
3. Anecdotal Notes: Original, greenies, mounted on correct page. Submit only if student has “greenies”.
4. Critical Incident Report: Original, submit only if form has been issued.
5. Evaluations: Submit only if clinical site does independent student evaluation. Mid-semester evaluations go here (both forms).
6. Monthly Clinical Experience Log: Print hard copy of “yearly total” page of excel file (one or two pages preferred).
7. Daily Clinical Logs: Original, daily sheets completed and sorted by date.
8. Competency Forms: Patient Care/Nursing procedures, QC procedures
9. Procedure Evaluation Forms: Original, green evaluation form (**all even if uncompleted**).
10. 2nd Year Procedure Evaluation Checklist: Original, all entries signed and dated.
11. RT 277 Clinical and Peds Rotation Objectives: Original, signed by clinical educator, reviewed with student.
12. Repeat Rate Analysis: Original, all entries completed.
13. Student Course and/or Clinical Site Evaluations: Must be completed on-line by the end of the semester. If not completed clinical grade will not be issued. Web address will be provided in class.

The following documents are submitted separate:

1. Graduate Exit Survey:
2. ARRT Core Competencies and all completed terminal evaluations:
*** **important - submit all ARRT forms in separate 3 ring paper folder** ***
3. **May dosimeter and holder**

Note: The nine month post program survey is **required** nine months after program completion on-line.

ORANGE COAST COLLEGE RADIOLOGIC TECHNOLOGY PROGRAM

NAME _____ CLINICAL SITE _____

1ST year student

STUDENT ORIENTATION TO CLINICAL FACILITY

RATIONAL:

All students must be oriented to the affiliate where clinical experience is to be provided. Each student is to complete the following orientation with the assistance of the clinical educator or assigned individual.

DIRECTIONS:

As you feel you have met the statements, place a check mark in the space provided. This form must be completed and placed in the student clinical manual within 30 days from the beginning of the new rotation.

1. Parking Regulations:
 - a. Includes both day time and evening rules.
2. Cafeteria Procedures:
 - a. Times and duration of meals and coffee breaks.
 - b. Provisions for students carrying lunches.
3. Washroom Facilities:
 - a. Both male and female.
4. Locker Facilities:
 - a. To include proper location for books, outer clothing, purses, and valuables storage.
5. Safety and Emergency Procedures:
 - a. Fire regulations
 - b. Codes (resuscitation team)
 - c. Security guard services
 - d. Reporting accidents and incidents
 - e. Disaster plan
 - f. MSDS data sheets
6. Absences or Tardiness in the Clinical Area:
 - a. When to notify
 - b. Where to notify
 - c. How to notify
7. Location of Student Assignment:
 - a. Where posted, specific objectives, etc.
8. Learning Resource Materials:
 - a. Library: rules and privileges.

Student Orientation to Clinical Facility – continued

9. Orientation to Department:
- a. Review of routine views for procedures.
 - b. Patient transportation procedures to and from department.
 - c. Mobile unites: c-arm and portables.
 - d. Location of equipment and supplies:
 - Cassettes and grids
 - Contrast media
 - Immobilization aides
 - Lead protective devices
 - Lead markers
 - Emergency cart/supplies
 - Linens
 - Other accessory items: needles, syringes, tourniquets, I.V. tubing, emesis basins, bandaging materials.
 - e. Operation of special equipment:
 - Monitors, I.V.'s, Oxygen, etc.
10. Introduction to Key Personnel:
- a. Radiologist(s)
 - b. Chief Technologist
 - c. Staff Radiologic Technologist(s)
 - d. Key Ancillary Staff
11. Conference Facilities:
- a. Location of rooms
12. Communications During Clinical Assignment:
- a. Contact in case of emergency
 - b. Making outside phone calls
 - c. Visiting patients
 - d. Contacting other students
13. Information about Hospital:
- a. History
 - b. Bed capacity
 - c. Administrative personnel
14. Telephone Protocol:
- a. How to answer phone

My signature below indicates that I have reviewed and understand each statement above. Should I have questions regarding any of the above, I will be sure to ask the clinical educator, department head, or other appropriate personnel for clarification prior to signature.

Student's Signature

Clinical Educator's Signature

Date

ORANGE COAST COLLEGE RADIOLOGIC TECHNOLOGY PROGRAM

NAME _____ CLINICAL SITE _____

2nd year student

STUDENT ORIENTATION TO CLINICAL FACILITY

RATIONAL:

All students must be oriented to the affiliate where clinical experience is to be provided. Each student is to complete the following orientation with the assistance of the clinical educator or assigned individual.

DIRECTIONS:

As you feel you have met the statements, place a check mark in the space provided. This form must be completed and placed in the student clinical manual within 30 days from the beginning of the new rotation.

1. Parking Regulations:
 - a. Includes both day time and evening rules.
2. Cafeteria Procedures:
 - a. Times and duration of meals and coffee breaks.
 - b. Provisions for students carrying lunches.
3. Washroom Facilities:
 - a. Both male and female.
4. Locker Facilities:
 - a. To include proper location for books, outer clothing, purses, and valuables storage.
5. Safety and Emergency Procedures:
 - a. Fire regulations
 - b. Codes (resuscitation team)
 - c. Security guard services
 - d. Reporting accidents and incidents
 - e. Disaster plan
 - f. MSDS data sheets
6. Absences or Tardiness in the Clinical Area:
 - a. When to notify
 - b. Where to notify
 - c. How to notify
7. Location of Student Assignment:
 - a. Where posted, specific objectives, etc.
8. Learning Resource Materials:
 - a. Library: rules and privileges.

Student Orientation to Clinical Facility – continued

- 9. Orientation to Department:
 - a. Review of routine views for procedures.
 - b. Patient transportation procedures to and from department.
 - c. Mobile unites: c-arm and portables.
 - d. Location of equipment and supplies:
 - Cassettes and grids
 - Contrast media
 - Immobilization aides
 - Lead protective devices
 - Lead markers
 - Emergency cart/supplies
 - Linens
 - Other accessory items: needles, syringes, tourniquets, I.V. tubing, emesis basins, bandaging materials.
 - e. Operation of special equipment:
 - Monitors, I.V.'s, Oxygen, etc.
- 10. Introduction to Key Personnel:
 - a. Radiologist(s)
 - b. Chief Technologist
 - c. Staff Radiologic Technologist(s)
 - d. Key Ancillary Staff
- 11. Conference Facilities:
 - a. Location of rooms
- 12. Communications During Clinical Assignment:
 - a. Contact in case of emergency
 - b. Making outside phone calls
 - c. Visiting patients
 - d. Contacting other students
- 13. Information about Hospital:
 - a. History
 - b. Bed capacity
 - c. Administrative personnel
- 14. Telephone Protocol:
 - a. How to answer phone

My signature below indicates that I have reviewed and understand each statement above. Should I have questions regarding any of the above, I will be sure to ask the clinical educator, department head, or other appropriate personnel for clarification prior to signature.

Student's Signature

Clinical Educator's Signature

Date

CLINICAL EVALUATION INSTRUCTIONS

Evaluation of the student's clinical progress is essential to his/her development as a Radiologic Technologist and should be looked upon as a positive learning tool. By identifying student strengths and building upon them, the student can better overcome potential weaknesses.

Evaluation, within any given clinical course, should occur in the following manner:

1. **Monthly Evaluation**

The monthly attendance sheet has a comment and evaluation section at the bottom of the page. At the end of the month, the clinical educator will evaluate your progress during that month per your specific clinical assignment.

2. **Procedure Evaluation Form - For Practical Application of Learning**

To be used when the student is independently performing a radiographic procedure. The form should be given to the designated person (a technologist with a minimum of two years clinical experience) who will be evaluating the student **before** the student starts the procedure. For each procedure evaluation, the student must first complete a minimum of three successful examinations of a body area prior to procedure evaluation – see procedure evaluation form for specific directions.

In the first year, **blue** evaluation forms **are required**. The student is evaluated under direct supervision. After student demonstrates proficiency under direct supervision of a given radiographic procedure (as documented by signature on procedure evaluation checklist and after the 500 hour mark of the program) the student can perform the exam under indirect supervision.

Second year students are required to re-demonstrate their proficiency, under indirect supervision on **green** evaluation forms. See respective procedure evaluation checklist and green evaluation forms for instructions and criteria.

3. **Mid Semester Evaluation**

During the eighth week of the semester, the clinical educator will complete a mid-semester evaluation on each student. The purpose of this evaluation is to provide feedback to the student regarding clinical progress to date and a grade indicator. Specific goals for the remaining eight weeks will be formulated at this time. The student will also have an opportunity for input by completing a self mid-semester evaluation and discussing such with the clinical educator.

4. **Clinical Objectives - Semester End**

These objectives are designed to be the final semester review and will determine the student's clinical course grade. All objectives should be met for satisfactory course completion. During the last week of the semester, the educator will complete these forms

and share such with the student during the semester end conference. The student will be given an opportunity for input by completing said forms in pencil before submitting them to the clinical educator.

Each clinical course has specific learning objectives or goals. In each instance they are compatible with or parallel to the classroom instructional program. On the clinical evaluation forms, you will find objectives that answer three (3) questions: what, how, and how well. There are frames related to radiographic skills, patient care techniques, departmental procedures, your personal appearance and attitudes, as well as dependability and professional growth. **All objectives are designed to be met!** Obviously they are more easily met in the beginning and become progressively more difficult as you mature to the level of a "registry eligible" staff technologist.

By reading the objectives **at the beginning** of clinical course, you can determine what is required of you. You are expected to conduct your day-to-day experiences in such a manner so as to meet the pre-determined performance standards.

5. **Procedure Evaluation Checklist**

This document is used as a sign-off sheet to verify proficiency in performing radiographic procedures. Before the exam can be signed off as a proficient, there must be a completed procedure evaluation form (see #2) verifying that this procedure has been previously evaluated. No exam will be signed-off without this requirement being met. The procedure evaluations are used as terminal competencies for the end of the 1st year phase of the program and determining satisfactory program completion. No student will complete the program without this evaluation requirement being met.

6. **ARRT Terminal Competencies**

For successful program completion and to meet ARRT exam eligibility requirements, student must demonstrate terminal competencies as stated on the ARRT and PT Care Skills required radiographic procedures. These final evaluations will be scheduled during the last two clinical courses (RT 276, RT 277).

A terminal competency evaluation form **must** be used to document proficiency. This evaluation cannot be completed until the student has completed direct and indirect procedure evaluations for the exam. Verification of the evaluation is done by signature on the terminal competencies form. If a student fails to complete these terminal competencies by the end of the last clinical course, successful program completion has not been achieved. **Clinical training will be extended and the student will be ineligible to set for the External Exam(s).**

7. **Student Evaluation of Radiology Department**

You too have the opportunity to evaluate. At the end of each clinical course, you are required to complete the radiology department evaluation form. By your candid comments we can identify strengths and weaknesses among our clinical affiliates and within the program. The survey can be

found at: <http://climate.dis.cccd.edu/classclimate/indextud.php>

All evaluation forms are due at semester's end along with other required documentation during clinical final exam. If the college fails to receive the required clinical records, **an unsatisfactory grade is assigned**, which will bar you from program continuation.

ORANGE COAST COLLEGE
RADIOLOGIC TECHNOLOGY PROGRAM
RADIOGRAPHIC ROOM ORIENTATION

Student _____ Date _____

Clinical Affiliate _____ Room # & Type _____

Grading Criteria: **A=Acceptable** **B=Improvement Needed** **C=Unacceptable**

Directions: *Please place a check (one) under the appropriate letter for each criteria.*

	A	B	C	N/A
1. Machine				
On/Off	_____	_____	_____	_____
KV Controls	_____	_____	_____	_____
MA Controls	_____	_____	_____	_____
Time Controls	_____	_____	_____	_____
MAS Controls	_____	_____	_____	_____
2. Phototimers				
Chambers	_____	_____	_____	_____
Density	_____	_____	_____	_____
3. Tube Locks				
Vertical	_____	_____	_____	_____
Horizontal	_____	_____	_____	_____
Longitudinal	_____	_____	_____	_____
Angulation	_____	_____	_____	_____
Rotation	_____	_____	_____	_____
Detent	_____	_____	_____	_____
4. Bucky Locks				
Film Holder	_____	_____	_____	_____
Bucky	_____	_____	_____	_____
5. Tube Head				
Field Light	_____	_____	_____	_____
Collimator Knobs	_____	_____	_____	_____
Collimator Scale	_____	_____	_____	_____
Manual Collimator	_____	_____	_____	_____
Automatic Collimator	_____	_____	_____	_____
6. Alignment				
Tube to Table	_____	_____	_____	_____
Tube to Bucky	_____	_____	_____	_____
SID (Horizontal & Vertical)	_____	_____	_____	_____
7. Table Motion				
Vertical	_____	_____	_____	_____
Longitudinal	_____	_____	_____	_____
Lateral	_____	_____	_____	_____
8. Other Accessories	_____	_____	_____	_____

Evaluator's Signature _____ **Date** _____

ORANGE COAST COLLEGE
RADIOLOGIC TECHNOLOGY PROGRAM COMPETENCIES
Patient Care/Nursing Procedures

Student _____ Date _____

Clinical Affiliate _____ Clinical course (**circle one**) RT 176 RT 271 RT 276

Directions: Using this checklist, evaluate student's performance in demonstrating, under direct supervision, the skills listed.

Grading Criteria: A=Acceptable B=Improvement Needed C=Unacceptable

Please place a check under the appropriate letter for each criteria.

	A	B	C
1. Oxygen Tanks (O ₂)			
Connection to Wall Outlet	_____	_____	_____
Patient Application with mask or nasal cannula	_____	_____	_____
Off/On & Flow Rate	_____	_____	_____
2. I			
V			
Rate of Flow (gravity)	_____	_____	_____
IVAC Pumps	_____	_____	_____
Troubleshooting equipment malfunctions	_____	_____	_____
3. Isolation Technique			
Portable Exams (2 man technique)	_____	_____	_____
Patient transfer	_____	_____	_____
4. Adherence to Standard Precautions			
Utilization of Supplies	_____	_____	_____
Handwashing	_____	_____	_____
5. Foley Catheter Care	_____	_____	_____
6. Department Emergency Codes			
Code Blue	_____	_____	_____
Code Red	_____	_____	_____
Miscellaneous Codes (please list)			
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
7. Sterile Procedures			
Gloving Procedure	_____	_____	_____
Tray Set-up	_____	_____	_____
Maintaining a Sterile Field	_____	_____	_____
Proper Disposal of Contaminated Materials	_____	_____	_____
8. Suction Equipment			
Setup and Utilization	_____	_____	_____
	A	B	C

Over

ORANGE COAST COLLEGE
RADIOLOGIC TECHNOLOGY PROGRAM
RT 277 QUALITY CONTROL PROGRAM CHECK-OFF

Student _____ Clinical Affiliate _____

Quality control is an integral part of a Diagnostic Imaging department. High quality films are not only a result of exposure technique and positioning, but, also of accurate equipment calibration and film processor operation. The goal of a quality control program is to minimize variables in hardware performance.

Directions: Using this checklist, evaluate student's performance in demonstrating, under supervision, the skills listed.

Grading Criteria: **A**=Acceptable **B**=Improvement Needed **C**=Unacceptable

Please place a check (one) under the appropriate letter for each criteria.

	A	B	C
1. X-ray Tube Warm-up	_____	_____	_____
2. Fluoro tube Warm-up	_____	_____	_____
3. Radiographic Room Preparation	_____	_____	_____
4. Fluoro Equipment Quality Control			
Performs Required Checks	_____	_____	_____
Charts Data	_____	_____	_____
4. Quality Control/Assurance			
Phantom Analysis	_____	_____	_____
Charts Data	_____	_____	_____
Corrective Measures	_____	_____	_____
Troubleshooting	_____	_____	_____
Artifact Identification	_____	_____	_____
5. Required Equipment Quality Control/ Preventive Maintenance	_____	_____	_____
6. Repeat Film Rate			
Monthly	_____	_____	_____

Summarize Performance: note areas of strength and concern

Circle Final Grade: **4 3 2 1** Scoring Criteria: 95% or better competency = *Score 4*
90% or better competency = *Score 3*
85% or better competency = *Score 2*
80% or better competency = *Score 1*

Signature of Evaluator

Date

Signature of Student

Date

*Note: Items checked as **Unacceptable** must be retested*

CRITICAL INCIDENT REPORT

NAME_____

SEMESTER_____YEAR_____

CLINICAL EDUCATION – RADIOGRAPHIC PROCEDURES

The following are the Department of Radiologic Health’s (RHB) recommendations regarding clinical education and number of procedures performed.

1. It is understood that most, but no necessarily all, of the procedures listed below will be carried out in medical health care facilities.
2. Each student **shall keep adequate records** of procedures assisted and performed.
3. The total number of procedures assisted or performed by each student should be as indicated below.
4. “Each phase of clinical procedures” means each position or procedure listed below that requires specific and distinct positioning or selection of technique.

<u>Categories</u>	<u>Procedures</u>	<u>Number of Procedures</u>	
		<u>Minimum</u>	<u>Optimum</u>
Chest	Lungs, Heart	200	400
Musculo-Skeletal	Upper extremities including shoulder girdle (80), lower extremities (60), spine including pelvis and hips (90), rib cage and sternum (20)	250	450
Skull	Skull, sinuses, facial and nasal bones, mandible, mastoids, TMJ	175	250
Gastro-Intestinal	Esophagus, upper gastrointestinal tract, small bowel, colon, cholecystography	110	200
Genito-Urinary	Urography (excretory, retrograde), KUB cystogram urethrogram	85	150
Vascular Studies	Angiography, aortography, arteriography, venography, lymphangiography	10	50
Contrast Studies	Myelography, bronchography sialography, hysterosalpinography, arthrography	20	100

<u>Categories</u>	<u>Procedures</u>	<u>Number of Procedures</u>	
		<u>Minimum</u>	<u>Optimum</u>
Special Studies	Tomography, eye foreign body localization, cineradiography, mammography	30	100
Surgical procedures		20	50
Portable (emergency) procedures		50	100
Total		950	1,850

**RECOMMENDED NUMBER OF EXAMS
PERFORMED BY THE STUDENT THROUGH THE TOTAL PROGRAM**

<u>Region</u>	<u>Minimum Recommended # of Examinations</u>	<u>Total Recommended # of Examinations</u>
UPPER EXTREMITIES		100
Finger or thumb	10	
Hand	10	
Wrist	10	
Forearm	10	
Elbow	10	
Humerus	10	
SHOULDER		40
Shoulder joint	10	
Acromioclavicular joint	5	
Scapula	10	
Clavicle	10	
Sternoclavicular joint	5	

RECOMMENDED NUMBER OF EXAMS - continued

<u>Region</u>	<u>Minimum Recommended # of Examinations</u>	<u>Total Recommended # of Examinations</u>
LOWER EXTREMITY		100
Toes	5	
Foot	5	
Calcaneus	5	
Ankle	10	
Leg	10	
Knee	10	
Patella	10	
Femur (lower 2/3)	10	
PELVIC GIRDLE		40
Pelvis	10	
Sacroiliac joints	5	
Hip joint	10	
Upper femur	5	
VERTEBRAL COLUMN		100
Cervical spine	15	
Thoracic spine	15	
Lumbar spine	15	
Sacrum	5	
Coccyx	5	
Scoliosis series	10	
THORACIC CAGE		250
Sternum	5	
Ribs	15	
Lungs	200	
Cardiac series	10	