

FOOTHILL COLLEGE  
RADIOLOGIC TECHNOLOGY PROGRAM

CLINICAL EDUCATION  
MANUAL

FIRST & SECOND YEAR



2011

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## CLINICAL EDUCATION EVALUATION PROCESS

Clinical education is an essential part in the education of radiographers. It combines cognitive (classroom or acquired knowledge), psychomotor (clinical or motor skills), and affective (emotions, values, and attitude) aspects of the profession. All three of these aspects must be evaluated in the clinical education facility.

Two evaluation processes will be used each quarter to evaluate students' clinical educational progress. These two evaluations will be combined at the end of the quarter to determine the clinical grade.

The first evaluation is the **Clinical Education Evaluation** and will evaluate the students' overall progress in the following ten categories:

- Radiation Protection
- Equipment
- Punctuality and Dependability
- Co-Worker, Hospital Relationships
- Job Performance
- Technical Factors
- Positioning
- Patient and Nursing Procedures
- Student Presentation
- Image Evaluation

The Clinical Education Evaluation will be developed by observation from the Clinical Instructor, the College Instructor, and the clinical staff. This will account for 60% of the students' final quarter grade.

The second evaluation is the Clinical Competency Evaluation. This is a detailed documentation of acquired competency of specific exams. For each quarter of the Program the student will be required to prove competency for a specified number and category of exams. The student must complete all required competencies for all quarters to successfully progress with the clinical education. The Clinical Competency Evaluations will account for 40% of the students' final quarter grade.

## **CLINICAL EDUCATION ORIENTATION GUIDELINES**

At the beginning of each rotation (Fall, Winter and Summer Quarters) students will be given an orientation by the clinical instructor covering the following areas:

1. Tour of the hospital and imaging department
2. Emergency codes
3. Location of linen, medial supplies, fire extinguisher, emergency equipment, oxygen and suction machine.
4. Dress code
5. Procedure for illness and tardiness
6. Explanation of patient requisition and department workflow
7. A two-hour rotation through the lite-room, front desk, and image library

During each ten-week rotation the student will be given:

1. An image analysis session, one-hour per week by the college instructor
2. Room assignments with rotations through general radiography, fluoroscopy, and portables. Surgery rotations are encouraged after the first quarter.
3. A total of eight written observations of performance by a registered staff technologist or instructor
4. Opportunity to complete Clinical Competency Evaluations

**FOOTHILL COLLEGE RADIOLOGIC TECHNOLOGY PROGRAM**  
**Clinical Education Objectives**

**First Year**  
**Fall, Winter, Spring, and Summer Quarters**

Students will observe and participate in a wide variety of radiographic exams.

**Objectives:**

The student will complete the required competencies for the quarters listed below.

**Fall Quarter:**

Upon completion of fall quarter the student will demonstrate competency with the following radiographic procedures.

*AP abdomen*  
*PA and Lateral Chest*  
*One Non-Trauma Extremity*

**Winter Quarter:**

Upon completion of winter quarter the student will demonstrate competency with radiographic procedures in the following areas.

*AP abdomen*                      *Upper Extremities*  
*PA and Lateral Chest*        *Lower Extremities*

**Spring Quarter**

Upon completion of spring quarter the student will demonstrate competency with radiographic procedures in the following areas:

*Additional Upper and Lower Extremities*

**Summer Quarter**

**Begin pediatric competencies.**

Upon completion of the summer quarter the student will demonstrate competency with

*Additional Upper and Lower Extremities*

and two competencies from the following list:

*Pelvis*            *Hip*            *C-spine*            *T-spine*            *L-spine*

The student will observe, perform with supervision, and prepare for competency in the following exams:

*Upright & Decubitus Abdomen*        *UGI Series*            *BE Series*

All the above procedures will include routine projections on an agile patient with average body habitus. The student will perform the above procedures as requested by the patient's physician in an efficient, safe, technically accurate, and professional manner.

During the student clinical assignment, the student will:

- A. Demonstrate empathy for the patient and recognize their needs.
- B. Appreciate the need for medical ethics.
- C. Develop appropriate interpersonal relationships.
- D. Recognize the need for adherence to medical legal principles.
- E. Apply safety precautions in relationship to patient and others.

**FOOTHILL COLLEGE RADIOLOGIC TECHNOLOGY PROGRAM**  
**Clinical Education Objectives**

**Second Year Students**  
**Fall, Winter, and Spring Quarters**

Students will observe and participate in a wide variety of radiographic exams.

**Objectives:**

The student will complete the required competencies for the quarters listed below.

**Fall Quarter:**

Upon completion of fall quarter the student will demonstrate competency with the following radiographic procedures:

<i>Pelvis</i>	<i>Hip</i>	<i>C-spine</i>	<i>T-spine</i>
<i>L-spine</i>	<i>Trauma C-spine</i>	<i>Portable Chest</i>	<i>Portable Abdomen</i>
<i>Portable Orthopedic</i>	<i>C-arm Procedure</i>	<i>Cross Table Lateral Hip</i>	

and two competencies from the following list:

<i>Abdomen Decubitus or Upright</i>	<i>UGI Series</i>	<i>Barium Enema</i>
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**Winter Quarter:**

Upon completion of winter quarter the student will demonstrate competency with the following radiographic procedures:

<i>UGI Series</i>	<i>Barium Enema</i>	<i>Skull</i>	<i>Ribs</i>
<i>Chest AP (Wheelchair or Stretcher)</i>	<i>Abdomen Decubitus or Upright</i>		
<i>Chest Routine (age 6 or younger)</i>	<i>Paranasal Sinuses</i>		

*and two elective competencies*

**Spring Quarter**

Upon completion of spring quarter the student will demonstrate competency *with an additional thirteen electives and ten terminal competencies.*

The student must meet the following set of minimum standards as secondary objectives in the second year.

**CT / Angiography**

- Student will spend one week in either CT or angiography during the fall quarter of the first 6-month rotation.
- During the second 6 months, the student will spend one week in the modality not observed in the previous 6-month rotation.

**MRI**

- Student will spend one week in MRI per rotation.

**Mammography**

- Optional. Student must have completed the Mammography Course at Foothill College before doing a mammography rotation.

**Off-Hour Assignment**

Evening and weekend shifts and will commence during the winter or spring quarter of the second year.

**The student will meet the objectives of the following ten categories with a minimum percentage of 80%.**

**I. Radiation Protection**

Given a requisition for a radiographic examination, the student will demonstrate accuracy in practicing radiation protection for the patient, personnel and self by:

- A. Closing doors during procedures and exposures.
- B. Shielding all patients.
- C. Collimating at least to image receptor size and/or part size.
- D. Protecting himself/herself and others from irradiation by wearing aprons, , gloves and dosimeter.
- E. Keeping repeats to a minimum.
- F. Considering pregnancy status; following department protocol.

**II. Equipment**

During a radiographic examination the student will be able to demonstrate knowledge, understanding and dexterity in the proper use of equipment to the satisfaction of evaluation guidelines. The following functions will be observed:

- A. Competency and proficiency with equipment.
- B. Safety precautions, including keeping room furnishings and accessories properly placed and safely positioned.
- C. Effective manipulation of control panel.

**III. Punctuality and Dependability**

Upon assignment to a given clinical facility, the student will adhere to the following areas of importance in attendance, punctuality and dependability:

- A. Punctuality in reporting to the room at the start of a shift; being in assigned room and ready for patient at least 5 minutes before start of shift.
- B. Minimum loss of time due to absenteeism
- C. Consideration of others by taking proper length of time for breaks according to department policy.
- D. Properly notifying the department in case of absence or tardiness.
- E. Communicating whereabouts appropriately.

#### **IV. Co-Worker, Hospital Relationships**

During the clinical assignment, the student will demonstrate positive relationships in dealing with co-workers, the public and other hospital staff. Areas of importance include:

- A. Being tactful and courteous with staff and others.
- B. Taking the initiative and helping other staff members
- C. Working as a team with the technologist.
- D. Accepting constructive criticism and conducting oneself in a professional manner.
- E. Adhering to dress code.
- F. Communicating effectively and following instructions
- G. Contributing to a pleasant working environment.

#### **V. Job Performance**

During the clinical assignment the student's job performance will be observed and satisfactory ratings must be achieved in each of the following areas:

- A. Marking all radiographs according to department standards.
- B. Planning and organizing work efficiently - having foresight, making sure all supplies needed for exam are set up before exam begins.
- C. Being alert and interested in what is happening in room and asking pertinent questions.
- D. Reading and understanding the requisition and properly identifying the patient by checking name bands.
- E. Maintaining a neat, clean, well-stocked room (i.e., changing pillow cases, cleaning table and chest unit frequently and stocking supplies in cabinets).
- F. Communicating effectively.
- G. Following verbal instructions with multiple steps.
- H. Making effective use of free time.
- I. Completing the exam in a reasonable amount of time.
- J. Perseveres and follows through on exams – releases patient when procedure is completed – doesn't leave an exam in progress except with technologist's permission.
- K. Judges new or changing situations and makes reasonable decisions.
- L. Demonstrating proper ethical behavior

#### **VI. Technical Factors**

During radiographic procedures stated above, the student will be observed in the selection of proper technical factors for routine examinations of the average patient. This includes:

- A. Setting the control panel accurately for an exposure, setting correct kV and mAs per technique chart, selecting correct tube and bucky and using optimal kVp.
- B. Understanding how various mA, kV, time and distance factors affect the radiographic image.
- C. Being able to differentiate between phototiming and manual technique.
- D. Checking control panel before exposure.

- F. Identifying and correcting technical errors, i.e., grid lines, grid cut-off, under/over exposure, fog, double exposure, motion, and artifacts.
- F. Being aware of different imaging systems requiring different techniques.
- G. Being able to determine appropriateness of exposure based on exposure index (S-number, LgM, EI, etc.)

## **VII. Positioning**

On all radiographic procedures stated above, the students will be able to demonstrate skills in positioning technique as observed by the clinical instructor. Positioning factors include:

- A. Knowing department routines for exams stated in objectives.
- B. Knowing specific centering for each part radiographed including angulation of the x-ray tube and body part.
- C. Positioning the patient carefully and accurately; using proper immobilization.
- D. Identifying basic anatomy and critiquing images.
- E. Handling patients gently when positioning, using concise instructions, and watching patient during breathing instructions.

## **VIII. Patient Care and Nursing Procedures**

During a radiographic study, the student will demonstrate knowledge and understanding of various nursing procedures and basic patient care. Areas of importance are:

- A. Identifying patient properly and using his/her last name during procedure.
- B. Communicating effectively with the patient.
- C. Explaining exam to the patient.
- D. Using a safe approach when transferring patients.
- E. Knowing the location of the emergency tray, emergency drugs, suction machine and oxygen.
- F. Proper handling of a patient with IV's and catheters.
- G. Applying surgical and medical asepsis in drawing up syringes, working around a sterile field.
- H. Completing the exam in a reasonable amount of time.

## **IX. Student Presentation**

The student will follow the guidelines and objectives for the Student Clinical Presentations.

## **X. Image Evaluation**

The student will evaluate his/her images and describe the required criteria for an acceptable radiograph. Areas of importance are:

- A. Identifying optimum contrast and density
- B. Identifying proper anatomy and centering
- C. Identifying motion if present
- D. Describing image receptor and part centering

- E. Identifying proper patient positioning
- F. Identifying collimation and shielding

During the fall, winter, spring and summer clinical assignments the student will be observed on his/her performance in all areas stated in the objectives.

It is essential that the student have one observation sheet per week (minimum of 8 for the quarter). The eight observation forms should include at least (1) from the hospital instructor. No more than 25% can be filled out by second year students.

The final clinical education score will be computed by the college instructor using the evaluation key. This will count as 60% of the course grade. The other 40% will be the clinical competency evaluation. The following clinical grading scale reflects the point value that will determine the final course grade.

95-100	= A
87-94	= B
80-86	= C
Below 80	= D

Failure to achieve "C" performance in any one of the objective categories will be sufficient cause to put the student through a probationary period. After placement on probation the student must earn and maintain a "C" in all areas of clinical performance in order to continue and finish the Foothill College Radiologic Technology Program.

## CLINICAL OBSERVATION SHEET

Student \_\_\_\_\_ Date \_\_\_\_\_

Observation based on student's assistance and/or performance of routine radiographic examinations.

Examination being performed: \_\_\_\_\_ Room \_\_\_\_\_

Observed by: \_\_\_\_\_ Assisted or Performed  
(circle one)

### **Radiation Protection**

1. Wears dosimeter
2. Closes doors
3. Shields appropriately
4. Collimates to part/IR size
5. Protects self and others
6. Considers pregnancy status

**Comments** \_\_\_\_\_

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### **Equipment**

1. Demonstrates competency and proficiency with equipment
2. Handles equipment carefully
3. Can set control panel correctly

**Comments** \_\_\_\_\_

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### **Punctuality and Dependability**

1. Is punctual to assigned room
2. Demonstrates flexibility
3. Communicates whereabouts appropriately
4. Observes length of breaks/lunch

**Comments** \_\_\_\_\_

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### **Co-Worker/Hospital Relationships**

1. Tactful and courteous
2. Shows initiative
3. Demonstrates team approach
4. Accepts constructive criticism
5. Projects professionalism
6. Communicates effectively
7. Follows direction
8. Contributes to a pleasant working environment
9. Adheres to department dress code
10. Demonstrates proper ethical behavior

**Comments** \_\_\_\_\_

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**Job Performance**

- 1. Marks all radiographs
- 2. Has organized work pattern
- 3. Follows through on exams
- 4. Is alert and interested
- 5. Shows confidence
- 6. Reads/understands requisition
- 7. Uses good judgment
- 8. Room clean and stocked
- 9. Communicates effectively
- 10. Follows verbal instructions with multiple steps
- 11. Makes effective use of free time

**Comments** \_\_\_\_\_

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**Technical Factors**

- 1. Sets accurate mAs and kV
- 2. Considers effect of F.S. size
- 3. Checks control panel before exposure
- 4. Evaluates patient technically
- 5. Can identify and correct technical errors
- 6. Can determine exposure accuracy by checking exposure index

**Comments** \_\_\_\_\_

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**Positioning**

- 1. Knows department routines
- 2. Knows the positioning criteria
- 3. Performs accurate positioning
- 4. Identifies image anatomy
- 5. Performs at efficient pace
- 6. Uses immobilization

**Comments** \_\_\_\_\_

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**Patient Care**

- 1. Identifies patient properly
- 2. Explains exam
- 3. Gives concise instructions
- 4. Is gentle and offers emotional support
- 5. Safely transfers pt./maintains privacy
- 6. Effectively assists physician
- 7. Handles patients with IV's correctly
- 8. Completes exam in a reasonable amount of time

**Comments** \_\_\_\_\_

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Signature of student \_\_\_\_\_

Comments \_\_\_\_\_

**FOOTHILL COLLEGE RADIOLOGIC TECHNOLOGY PROGRAM**  
**EVALUATION KEY AND GRADING CRITERIA**

The Evaluation Key and Grading Criteria are to be used by the evaluator when assessing students' clinical performance.

Included is the description of each scale from the following categories:

- I. Radiation Protection
- II. Equipment
- III. Punctuality & Dependability
- IV. Co-Worker, Hospital Relationships
- V. Job Performance
- VI. Technical Factors
- VII. Positioning
- VIII. Patient Care & Nursing Procedures
- IX. Student Presentation
- X. Image Evaluation

An expanded description of scale "A" is included to assist the evaluator when rating the student.

Forms to be used when evaluating students' clinical performance:

- 1. Evaluation Key & Grading Criteria
- 2. Clinical Observation Sheet
- 3. Clinical Evaluation
- 4. Clinical Education Objectives
- 5. Clinical Competency Objectives
- 6. Clinical Competency Evaluation

## **SCALE I      RADIATION PROTECTION**

- A.      Demonstrates exceptional ability in practicing radiation protection based upon the radiation protection objectives.
- B.      With few exceptions, demonstrates consistent ability in practicing radiation protection.
- C.      Demonstrates adequate ability in practicing radiation protection but needs to be reminded of the radiation protection guidelines.
- D.      Demonstrates limited ability and understanding in practicing radiation protection.

### **DESCRIPTION OF SCALE A. RADIATION PROTECTION**

If the student shows exceptional awareness and understanding of radiation protection, the student:

- always shields patients
- always closes doors while radiating.
- collimates to image receptor or part size
- protects him/herself and others from ionizing radiation by wearing a lead apron, gloves, and dosimeter.
- considers pregnancy status of a patient and follows department protocol.
- has minimal repeats

## **SCALE II.      EQUIPMENT**

- A.      With few exceptions, the student has the understanding and skill needed to work all equipment.
- B.      The student demonstrates an above average level of knowledge and understanding in equipment utilization.
- C.      The student shows a lack of retention in equipment utilization.
- D.      The student demonstrates unsafe working techniques and little or no skill in utilizing equipment.

## **DESCRIPTION OF SCALE A. EQUIPMENT**

The student with few exceptions demonstrates exceptional understanding and utilization of all equipment by:

- maneuvering the equipment smoothly, i.e., utilizing all locks, doesn't forcibly move or bang equipment into place, recognizes the limitations and demonstrates the advantages of the equipment and uses equipment in the best manner possible.
- using proper auxiliary equipment, i.e., immobilization devices etc.
- correctly setting the control panel.
- insuring safety in the room for patient and personnel by being aware of all possible hazards (footstool, overhead x-ray tubes, spilled liquid, etc.).

## **SCALE III. PUNCTUALITY AND DEPENDABILITY**

**(See the Attendance and Punctuality Grading Criteria in the Student Handbook.)**

- A. The student demonstrates consistent awareness and exceptional dependability in punctuality and break privileges.
- B. The student demonstrates consistent dependability in punctuality and break privileges. Has no more than two tardies or two occurrences. He/she properly notifies the hospital via departmental policy of illness and tardiness.
- C. The student demonstrates an acceptable attendance and break record. Has no more than three tardies or three occurrences. He/she properly notifies the hospital via departmental policy of illness and tardiness.
- D. The student demonstrates inconsistency in punctuality and length of break privileges. Does not have more than four tardies or four occurrences.

## **DESCRIPTION OF SCALE A. PUNCTUALITY AND DEPENDABILITY**

A student demonstrates exceptional awareness and concern for proper punctuality and dependability by always:

- reporting to his/her room ready to work 5 minutes before the start of his/her assigned shift.
- taking only the time allotted for coffee and lunch breaks, and only when given permission by his/her technologist.
- notifying the department in the event of absence or tardiness.
- communicating whereabouts appropriately.

#### **SCALE IV. CO-WORKER, HOSPITAL RELATIONSHIPS**

- A. The student is considerate of the needs of others, is enthusiastic, communicates well, takes the initiative to assist or perform exams and contributes to a pleasant working environment.
- B. Most of the time the student is considerate of the needs of peers and staff, takes the initiative to assist or perform exams and is an asset to the working environment.
- C. Generally the student is considerate of his/her interactions with others but has difficulty taking the initiative.
- D. The student shows some insensitivity in interactions with people and does little to promote a good working environment. The student tends to stand back rather than participate in exams.

#### **DESCRIPTION OF SCALE A. CO-WORKER, HOSPITAL RELATIONSHIPS**

A student demonstrates exceptional ability in co-worker and hospital relationships by always:

- being tactful and courteous.
- accepting constructive criticism and conducting him/herself in a professional manner.
- being neat and clean, adhering to dress code.
- being eager to work and cooperate with other technologists and peers.
- demonstrating a team approach.
- wearing proper identification.
- communicating effectively.
- projecting professionalism.
- contributing to a pleasant working environment.
- is willing to help others and takes the initiative.
- demonstrating proper ethical behavior.

#### **SCALE V. JOB PERFORMANCE**

- A. With few exceptions, the student is dependable in carrying out his/her job completely and thoroughly with pride in his/her work.
- B. The student performs his/her job at an above average level.
- C. The student has an average knowledge of his/her job and needs guidance in carrying out job specifics. Generally, the student needs assistance in completing exams effectively.

- D. The student's quality of work is consistently below standards and needs constant supervision.

\* **The student's grade will drop one grade level for each observation form less than the required eight.**

## **DESCRIPTION OF SCALE A. JOB PERFORMANCE**

A student demonstrates exceptional ability in job performance by:

- utilizing critical thinking skills
- reading the requisition and properly identifying the patients by looking at their name bands or calling them clearly by name.
- being efficient and well-organized in carrying out all the specifics of a routine exam, i.e., knowing the routines, taking histories, marking all images accurately, IDing images correctly and having all supplies at hand in a clean, neatly stocked and well kept room.
- demonstrating the ability to retain previously learned material
- working well as a team with a co-worker.
- persevering and following through on all exams making sure all images are complete and in order and sees to it that the patient is properly cared for and/or released from the radiology department.
- showing alertness and interest in an exam by asking pertinent questions.
- communicating effectively.
- being dependable and reliable.
- following verbal instructions with multiple steps
- completing the exam in a reasonable amount of time
- making effective use of free time.
- having minimum of eight observation forms

### **Second Year Only**

- Fulfills performance objectives for special clinical assignments, evenings, and weekends

## **SCALE VI. TECHNICAL FACTORS**

- A. The student possesses a knowledge and skill in x-ray technique.
- B. The student demonstrates adequate ability in selecting and applying technical factors.
- C. The student shows a lack of retention in some aspects of technical factors and technique application.
- D. The student needs continual and direct supervision in most aspects of technical factors and their applications.

## **DESCRIPTION OF SCALE A. TECHNICAL FACTORS**

The student demonstrates good technical knowledge and understanding of the image arrangements and their varying factors by:

- possessing the ability to correctly set the control panel for an exposure and use of the technique chart.
- being able to determine appropriateness of exposure based on exposure index (S-number, LgM, EI, etc.)
- being able to differentiate between phototiming and manual timing.
- correctly using and differentiating between mA, kV, time, and distance.
- being able to identify and correct technical errors such as over/under exposure, grid lines, grid cutoff, motion artifacts, fog and double exposures.
- being able to set the proper focal spot size
- accurately setting mAs and kV to compensate for pathology, motion, grids, etc.

## **SCALE VII. POSITIONING**

- A. With few exceptions, the student displays skillful and accurate knowledge in positioning.
- B. The student possesses an above average level of knowledge and dexterity needed in positioning.
- C. The student shows a lack of retention in some areas of positioning. Needs guidance.
- D. The student lacks knowledge and skill in basic positioning and needs direct and close supervision.

## **DESCRIPTION OF SCALE A. POSITIONING**

The student demonstrates outstanding knowledge and skill in positioning by:

- verbally identifying the specific centering for each anatomical part radiographed and the placement of the central ray and its angulation.
- easing the patient gently, not abruptly, into an accurate position and stabilizing the patient.
- knowing departmental routines.
- correctly identifying basic anatomy on the image when critiquing his/her images for positioning.
- verbally identifying the positioning, what it demonstrates, if the positioning is accurate, and how to correct positioning errors.
- demonstrating pride, responsibility, and independence in his/her work.

- working at an even but efficient pace; keeping up with patient flow.

### **SCALE VIII. PATIENT CARE AND NURSING PROCEDURES**

- A. With few exceptions, the student demonstrates the understanding and skill needed in patient handling and nursing technique.
- B. The student demonstrates an above average ability and knowledge in the performance of patient handling and nursing techniques.
- C. The student shows a lack of retention in some areas of nursing procedures and patient care. Needs guidance.
- D. The student demonstrates unsatisfactory knowledge and skill associated with nursing procedures and patient handling. Needs constant and close supervision.

### **DESCRIPTION OF SCALE A. PATIENT CARE AND NURSING PROCEDURES**

The exceptional student will demonstrate knowledge and understanding of various nursing procedures and basic patient care as dictated by department policy by:

- explaining the exam to the patient.
- communicating effectively with the patient.
- SAFELY transporting patients and maintaining patient safety at all times
- using patient's name during procedure.
- maintaining patient's modesty and comfort throughout the exam, i.e., pillows, blankets, etc.
- completing the exam in a reasonable amount of time
- being able to take vital signs, i.e., put a cuff on accurately and take a BP, pulse rate and record them.
- knowing the location of emergency trays/cart, drugs, O<sub>2</sub> and suction machine.
- being able to set up the oxygen tank and suction machine for use.
- offering patient assistance; showing empathy, kindness, and reassurance.

### **Additional criteria to be considered for the summer 1<sup>st</sup> year and second year student:**

- safely checking IV's.
- applying surgical and medical asepsis; being able to put on sterile gloves, gown, drawing up syringes, etc.
- being able to move around a sterile area without contaminating.
- following various isolation techniques.
- assisting the physician in non-emergency situations.
- calling in a code
- successfully passing the nursing procedures skills evaluation

## **SCALE IX. STUDENT PRESENTATION**

- A. 92-100% on presentation grade sheet
- B. 82-91% on presentation grade sheet
- C. 72-81% on presentation grade sheet

## **DESCRIPTION OF SCALE A STUDENT PRESENTATION**

- Completed all required criteria for image presentation - see Guidelines for Student Clinical Presentations.

## **SCALE X. IMAGE EVALUATION**

- A. The student consistently evaluates his/her images with accuracy and can describe the required criteria for an acceptable radiograph.
- B. With few exceptions the student evaluates his/her images with accuracy and describes the required criteria for an acceptable radiograph.
- C. The student shows a lack of retention in some areas of image evaluation.
- D. The student demonstrates limited ability and knowledge to evaluate images and required criteria for an acceptable radiograph.

## **DESCRIPTION OF SCALE A IMAGE EVALUATION**

The student performs the following objectives accurately and consistently.

- Identifies optimum contrast and density and describes controlling factors.
- Identifies proper anatomy and centering
- Identifies motion if present
- Describes image receptor and part centering
- Identifies proper patient positioning
- Identifies proper collimation and shielding.



#### IV. CO-WORKER, HOSPITAL RELATIONSHIP

A	B	C	D
10	8	6	0

- Is tactful and courteous with everyone
- Is willing to help others
- Takes the initiative to assist and perform exams.
- Is aware of teamwork expectations
- Demonstrates a team approach
- Accepts constructive criticism
- Projects professionalism
- Adheres to dress code
- Communicates effectively
- Contributes to a pleasant working environment
- Interacts well with ancillary departments
- Demonstrates proper ethical behavior

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

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#### V. JOB PERFORMANCE

A	B	C	D
10	8	6	0

- Marks all radiographs
- Makes sure all supplies needed for exam are set up before procedure
- Perseveres and follows through on exams
- Is willing to start exam on own
- Demonstrates self confidence
- Judges new or changing situations and makes sensible decisions
- Is alert and interested in what is happening in room (asks pertinent questions).
- Reads the requisition and properly identifies patient by checking name before exam
- Helps to keep the room neat, clean, and stocked
- Follows verbal instructions with multiple steps
- Performs exams in a reasonable amount of time
- Communicates effectively
- Makes effective use of free time
- Is well organized
- Minimum of 8 observation forms

#### **Second Year Only**

- Fulfills performance objectives for special clinical assignments, evenings, and weekends

COMMENTS: \_\_\_\_\_

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**VI. TECHNICAL FACTORS**

A	B	C	D
10	8	6	0

- Can set manual techniques for a given procedure
- Can set the AEC device when warranted
- Can accurately select mAs and kV to compensate for pathology, motion, grids, etc.
- Chooses correct focal spot size
- Determines appropriateness of exposure based on exposure index (S-number, LgM, EI, etc.)
- Sets panel at proper time during the exam

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

**VII. POSITIONING**

A	B	C	D
10	8	6	0

- Knows department routines for required exams
- Knows positioning criteria
- Knows angulation of the x-ray tube for body parts
- Is gentle toward patients when positioning
- Positions the patient carefully and avoids manipulation of the injured area
- Uses proper immobilization
- Uses concise instructions to the patient
- Can recognize basic anatomy
- Can identify positioning errors
- Can correct positioning errors
- Is progressing toward minimal supervision and confidence in positioning
- Works at efficient pace

Exams Student Needs Practice In: / Comments: \_\_\_\_\_

**VIII. PATIENT CARE**

A	B	C	D
10	8	6	0

- Explains exams to patients
  - Communicates effectively
  - Can safely transport and maintains patient safety at all times
  - Maintains patient's modesty, privacy and comfort
  - Offers patients assistance, shows empathy, is kind and reassuring
  - Is able to take vital signs
  - Performs exams in a reasonable amount of time
  - Minimizes length of time patient is left unattended or in an uncomfortable position
- Second Year Only**
- Successfully passes the nursing procedures skills evaluation

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

**IX. STUDENT PRESENTATION**

A	B	C	D
10	8	6	0

- Knowledge of procedure
- Subject material covered

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

**X. IMAGE EVALUATION**

A	B	C	D
10	8	6	0

- Identifies optimum contrast and density
- Identifies proper anatomy and centering
- Identifies image and patient positioning
- Describes image receptor and part centering
- Identifies proper patient positioning
- Identifies collimation and shielding

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

\_\_\_\_\_

Clinical Education Evaluation \_\_\_\_\_ Points \_\_\_\_\_ 60% of total

**Students must pass the Clinical Education Evaluation with a minimum of 80% or better to pass the overall evaluation.**

Competencies:	Points:	Competencies:	Points:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

\_\_\_\_\_ Total Points      \_\_\_\_\_ 40% of total

Total Percentage \_\_\_\_\_

Letter Grade \_\_\_\_\_

Signature of Student: \_\_\_\_\_ Date \_\_\_\_\_

Signature of Evaluator: \_\_\_\_\_ Date \_\_\_\_\_

Signature of Evaluator: \_\_\_\_\_ Date \_\_\_\_\_

NAME \_\_\_\_\_

CLINICAL SITE \_\_\_\_\_

*Comments of student on evaluation and rotation:*

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*Areas student feels confident in:*

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*Areas student feels improvement is needed:*

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*The student will work to improve:*

1. \_\_\_\_\_
2. \_\_\_\_\_

Signature of Student: \_\_\_\_\_ Date: \_\_\_\_\_

**TERMINAL COMPETENCIES**  
**Spring Quarter Second Year**

	<b>Competency</b>	<b>Points</b>
<b>One from Category 1</b>	_____	_____
Routine Chest		
Chest AP (Wheelchair or Stretcher)		
Routine Pedi Chest (age 6 or younger)		
 <b>Three from Category 2</b>	_____	_____
Any mandatory upper or lower extremity	_____	_____
	_____	_____
 <b>Three from Category 4</b>	_____	_____
C-spine, Trauma C-spine (Cross table lateral), T-spine, L-spine, Pelvis, Hip, Danelius-Miller	_____	_____
	_____	_____
 <b>Three from Category 5</b>	_____	_____
Supine Abdomen, Decubitus Abdomen or Upright Abdomen, UGI Series, Barium Enema Series	_____	_____
	_____	_____

Total Points: \_\_\_\_\_ / 250

## ELECTIVE COMPETENCIES

Competencies:	Points:	Competencies:	Points:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Total Points for Terminal Competencies:            / 250

Total Points for Electives                                    / 325

Total Competency Points:                            / 575                      \_\_\_\_\_ 40% of total

Total Overall Percentage      \_\_\_\_\_

Letter Grade      \_\_\_\_\_

Signature of Student: \_\_\_\_\_ Date \_\_\_\_\_

Signature of Evaluator: \_\_\_\_\_ Date \_\_\_\_\_

Signature of Evaluator: \_\_\_\_\_ Date \_\_\_\_\_

**Guidelines For Student Presentations**  
**First Year**  
**Fall, Winter & Spring Quarters**

Each student is responsible for the preparation and presentation of a 15-20 minute film critique on an assigned topic during each of the first three quarters: RT53A, 53B and 53C. The topic is to be prepared individually, but during its presentation, questions may be asked of the rest of the students, as group participation is encouraged. Images must originate from within the affiliate.

**Criteria Outline For Student Presentation**

**A. Knowledge of Examination**

1. Why was this exam performed (trauma / follow-up / primary)?
2. Is there any patient prep for this exam?
3. Are there any post procedure instructions necessary for this exam?
4. Discuss any special equipment used during this exam (sponges / fluoroscopy)?
5. Was contrast media used for this exam? Discuss contrast type and amount.
6. Is there any difficulty for the patient to tolerate the exam?
7. Review images with a Radiologist / Technologist, if available.

**B. Factors Affecting Image Quality**

1. What technical factors were used for each image (SID, mAs, kVp)?
2. What type of image receptor was used (CR / DR /)?
3. What type of equipment was used (Agfa / GE / Phillips, etc.)?

**C. Positioning and Anatomy**

1. What is the department protocol for this examination?
2. Discuss the position of the patient. (AP / lateral / supine / standing / etc.)
3. Discuss the positioning criteria for each projection, (IR size, CR, tube angle, obliquity, etc.)
4. Identify from memory, the radiographic anatomy demonstrated.
5. What structures are best visualized on each position?
6. Discuss the patient care involved with this exam.
7. Explain the proper phase of respiration (inspiration / expiration).

**D. Critical Critique**

1. Were the technical factors used for this exam appropriate?
2. Is the collimation adequate? If not, how could it be improved?
3. Are right or left markers apparent and used correctly?
4. Is the positioning correct? If not, what was done incorrectly and how can the image be improved?
5. Are there artifacts present? How could they have been avoided?
6. Display and critique a sub-optimal image related to the topic. Discuss possible reasons for repeating the exam.

E. **Radiation Protection Measures**

1. Discuss the use of gonad shielding as it relates to this exam.
2. What is the pregnancy policy at this facility?
3. Calculate the total radiation dose administered to the patient during this exam?
4. Are the exposure index readings for each image appropriate for this exam type?
5. How much fluoroscopy time was logged for this exam?

F. **Visual Aids**

1. The presentation must include visual aids. Examples include posters, PowerPoint with graphics, handouts, image receptors and sponges, contrast media, drawings or photos from books. Students should feel free to express their creative ideas in this category.

Student presentations will be given a maximum point score of 10 on the Clinical Education Evaluation.

## Presentation Rubric – 1<sup>st</sup> Year - F, W, & Sp Quarters

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

	Full Coverage - 1.0	Partial Coverage - 0.5	Unsatisfactory - 0.0
<b>Presented on Assigned Date</b>			
<b>Examination Knowledge</b>			
<b>Factors Affecting Image Quality</b>			
<b>Positioning</b>			
<b>Anatomy Identification</b>			
<b>Critical Critique</b>			
<b>Radiation Protection</b>			
<b>Visual Aids</b>			
<b>Overall Organization</b>			
<b>Time Limit</b>	20-15 min	14-11 min	10 or less
<b>Total Points Awarded</b>			

Percentage \_\_\_\_\_

Grade \_\_\_\_\_

92-100%    A    10 points

82-91%    B    8 points

72-81%    C    6 points

Below 72%    D    0 points

Notes & Comments: \_\_\_\_\_

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

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

**Guidelines For Student Presentations**  
**First Year**  
**Summer Quarter**

During the summer quarter of the first year, students will prepare a case study presentation to be given in the clinic as part of the film critique. The main purpose of this presentation is to give the student an opportunity to explore the imaging of a disease as well as the patient's treatment and prognosis. Topics should be selected according to the affiliate's specialties and the student's individual interests. Images must originate from within the affiliate. The length of the presentation should be 30 minutes and is worth 10 points towards the student's final grade in the hospital.

**CONTENT:**

1. Patient symptoms: What brought the patient to the doctor or hospital? It is expected that the student will thoroughly research the patient's pathology through use of the Internet, medical library or other appropriate avenues.
2. Discussion of imaging techniques and how diagnosis was made: The student is encouraged to sit down with the Radiologist and go over the patient's images and chart when possible.
3. Compare normal radiographic appearance with abnormal images depicting the appearance of the pathology.
4. Treatment plan: Radiation therapy, chemotherapy, surgery, drugs/medication, physical therapy.
5. Prognosis of the disease or condition: What is the health outlook for this patient?
6. Conclusion: In the conclusion the student must include a question and answer period where he or she is expected to field questions knowledgeably.
7. Reference bibliography: Must be turned in to the instructor at the time of the presentation. Bibliography must include consultations with key medical personnel and a list of Internet sites visited for research.

## Presentation Rubric – 1st Year Summer Quarter

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

	Full Coverage - 1.0	Partial Coverage - 0.5	Unsatisfactory - 0.0
<b>Presented on Assigned Date</b>			
<b>Visual Aids / Handouts</b>			
<b>Patient Symptoms</b>			
<b>Discussed Illness / Condition</b>			
<b>Imaging Techniques / Interview</b>			
<b>Normal / Abnormal Anatomy</b>			
<b>Treatment Plan</b>			
<b>Prognosis / Follow-Up</b>			
<b>Bibliography / Conclusion</b>			
<b>Time Limit</b>	30-25 min	24-20 min	19 or less
<b>Total Points Awarded</b>			

Percentage _____	92-100%	A	10 points
Grade _____	82-91%	B	8 points
	72-81%	C	6 points
	Below 72%	D	0 points

Notes & Comments: \_\_\_\_\_

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

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

**Guidelines For Student Presentations**  
**Second Year**  
**Fall & Winter Quarters**

During the fall and winter quarter of the second year, students will prepare a case study presentation to be given in the clinic as part of the film critique. The main purpose of this presentation is to explore the imaging of a disease, the treatment plan, the prognosis, and the imaging modalities utilized to diagnosis the pathology. Topics should be selected according to the affiliate's specialties and the student's individual interests. Images must originate from within the affiliate. The length of the presentation should be 30 minutes and is worth 10 points towards the student's final grade in the hospital.

**CONTENT:**

1. Patient symptoms: What brought the patient to the doctor or hospital? It is expected that the student will thoroughly research the patient's pathology through use of the Internet, medical library or other appropriate avenues.
2. Sequence of tests: Imaging, lab work-up, etc. Discuss the modalities used in diagnosing this patient's pathology (CT, Nuclear Medicine, Mammography, MRI, etc.). Why was this modality chosen?
3. Discussion of imaging techniques and how diagnosis was made: The student is encouraged to sit down with the Radiologist and go over the patient's images and chart when possible.
4. Treatment plan: Radiation therapy, chemotherapy, surgery, drugs/medication, physical therapy.
5. Prognosis of the disease or condition: What is the health outlook for this patient?
6. Conclusion: In the conclusion the student must include a question and answer period where he or she is expected to field questions knowledgeably.
7. Reference bibliography: Must be turned in to the instructor at the time of the presentation. Bibliography must include consultations with key medical personnel and a list of Internet sites visited for research.

## Presentation Rubric – 2nd Year

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

	Full Coverage - 1.0	Partial Coverage - 0.5	Unsatisfactory - 0.0
<b>Presented on Assigned Date</b>			
<b>Visual Aids / Handouts</b>			
<b>Patient Symptoms</b>			
<b>Discussed Illness / Condition</b>			
<b>Test Sequence - Modalities</b>			
<b>Imaging Techniques / Interview</b>			
<b>Treatment Plan</b>			
<b>Prognosis / Follow-Up</b>			
<b>Bibliography / Conclusion</b>			
<b>Time Limit</b>	30-25 min	24-20 min	19 or less
<b>Total Points Awarded</b>			

Percentage \_\_\_\_\_  
Grade \_\_\_\_\_

92-100%	A	10 points
82-91%	B	8 points
72-81%	C	6 points
Below 72%	D	0 points

Notes & Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

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

## RT 53A IMAGE ANALYSIS TOPICS

The Foothill College Instructor will present the following topics on a weekly basis throughout the academic quarter.

Session 1	Abdomen
Session 2	Chest
Session 3	Fingers, hand, wrist
Session 4	Forearm, elbow, humerus
Session 5	Folder Review
Session 6	Shoulder, clavicle
Session 7	Foot, ankle, os calsis
Session 8	Tib-Fib, knee
Session 9*	Student Presentations
Session 10	Student Presentations

\* If instructor has additional time near the end of the quarter and has completed all of the required topics they may choose to do one of the following:

- Review the previous topics.
- Critique repeat images.
- Have a student bring a case he/she was involved with and have them describe the exam.

## RT 53B IMAGE ANALYSIS TOPICS

The Foothill College Instructor will present the following topics on a weekly basis throughout the academic quarter.

Session 1	Hip, Pelvis, & Femur
Session 2	Acute Abdomen
Session 3	Esophagus, UGI Small Bowel
Session 4	BE
Session 5	Folder Review
Session 6	Gall Bladder and ERCP
Session 7	Emergency Care
Session 8	IVU
Session 9*	Student Presentations
Session10	Student Presentations and Grades

\* If instructor has additional time near the end of the quarter and has completed all of the required topics they may choose to do one of the following:

- Review the previous topics.
- Critique repeat images.
- Have a student bring a case he/she was involved with and have them describe the exam.

## RT 53C IMAGE ANALYSIS TOPICS

The Foothill College Instructor will present the following topics on a weekly basis throughout the academic quarter

Session 1	Cervical Spine
Session 2	Thoracic Spine
Session 3	Lumbar Spine / Sacrum & Coccyx
Session 4	Ribs
Session 5	Folder Review
Session 6	Skull
Session 7	Skull and cervical spine--trauma
Session 8	Tour of Central Services / Central Supply
Session 9*	Student Presentations
Session 10	Student Presentations

\* If instructor has additional time near the end of the quarter and has completed all of the required topics they may choose to do one of the following:

- Review the previous topics.
- Critique repeat images.
- Have a student bring a case he/she was involved with and have them describe the exam.

## SECOND YEAR IMAGE ANALYSIS TOPICS

### FALL SESSION

### TOPIC

1. Introduction
2. Nursing Procedures
3. CT Tour / Discussion
4. MRI Tour / Discussion
5. Sectional Anatomy / Head
6. Folder Review
7. Sectional Anatomy / Thorax
8. Sectional Anatomy / Abdomen & Pelvis
9. Sectional Anatomy / Spine & Extremities
10. Presentations
11. Grades
12. Open Topic

### WINTER SESSION

### TOPIC

1. Introduction
2. Nursing Procedures
3. Mammography Tour
4. Skull Labs
5. Skull Labs
6. Folder Review
7. Skull Labs
8. Angiography Tour / Discussion
  - Guide wires, catheters, supplies
9. Angiography / Heart Catherization
10. Presentations
11. Grades
12. Open Topic

### SPRING SESSION

### TOPIC

1. Introduction / Nursing Procedures
2. Professional Development/Resume/Interviews
3. Professional Development/Resume/Interviews
4. Quality Control of Digital Equipment
  - Per vendor protocol
5. Pediatric Radiology
6. Folder Review
- 7 – 10. Study Groups
11. Grades
12. Open Topic

## **Second Year - Winter Quarter Skull Labs**

### **SESSION 1**

Lesson objectives:

1. Student will mock position for Trauma Skull series.
2. Student will review radiographic images of Trauma Skull.

Lesson Activities:

1. Instructor will review Routine Skull positioning.
2. Instructor will demonstrate positioning for Trauma Skull series.
3. Instructor will demonstrate radiographic images for the above procedures.
4. Student will practice above steps.

### **SESSION 2**

Lesson Objectives:

1. Student will mock position for routine Paranasal Sinus series.
2. Student will review radiographic images of routine Paranasal Sinuses.

Lesson Activities:

1. Instructor will demonstrate routine positioning for Paranasal Sinuses.
2. Instructor will demonstrate radiographic images of routine Paranasal Sinuses.
3. Student will practice above steps.

### **SESSION 3**

Lesson Objectives:

- a. Student will mock position for routine Facial Bones.
- b. Student will mock position Trauma Facial Bone projections.
- c. Student will review routine radiographic images of the above procedures.

Lesson Activities:

1. Instructor will demonstrate routine Facial Bone positioning.
2. Instructor will demonstrate Trauma Facial Bone positioning.
3. Instructor will demonstrate radiographic images of the above procedures.
4. Students will practice above steps.

## **SESSION 4**

### Lesson Activities:

1. Student will mock position for Zygomatic Arch projections.
2. Student will mock position for routine projections of the Mandible.
3. Student will review radiographic images for the above procedures.

### Lesson Activities:

1. Instructor will demonstrate positioning for Zygomatic Arches.
2. Instructor will demonstrate positioning for Mandible.
3. Instructor will demonstrate radiographic images for the above procedures.
4. Student will practice above steps.

## **SESSION 5**

### Lesson Objectives:

1. Student will mock position for TMJ projections.
2. Student will mock position for Optic Foramina projections.
3. Student will review radiographic images for the above procedures.

### Lesson Activities:

1. Instructor will demonstrate positioning for TMJ projections.
2. Instructor will demonstrate positioning for Optic Foramina projections.
3. Instructor will demonstrate radiographic images for the above procedures.
4. Students will practice above steps.

# RADIOGRAPHY DIDACTIC AND CLINICAL COMPETENCY REQUIREMENTS



## *Eligibility Requirements Effective January 2005\**

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Candidates for certification are required to meet the Professional Requirements specified in Section 2.02 of the *ARRT Rules and Regulations*. This document identifies the minimum didactic and clinical competency requirements for certification referenced in the *Rules and Regulations*. Candidates who complete a formal educational program accredited by a mechanism acceptable to the ARRT will have obtained education and experience beyond the requirements specified here.

### **Didactic Requirements**

Candidates must successfully complete coursework addressing the topics listed in the *ARRT Content Specifications for the Examination in Radiography*. These topics are presented in a format suitable for instructional planning in the *ASRT Radiography Curriculum (2002)*.

### **Clinical Requirements**

As part of their educational program, candidates must demonstrate competence in the clinical activities identified in this document. Demonstration of clinical competence means that the program director or designee has observed the candidate performing the procedure, and that the candidate performed the procedure independently, consistently, and effectively. Candidates must demonstrate competence in the areas listed below.

- Six mandatory general patient care activities.
- Thirty-six mandatory radiologic procedures.
- Fifteen elective radiologic procedures to be selected from a list of 30 procedures.

### **Documentation**

The following pages identify specific clinical competency requirements. Candidates may wish to use these pages, or their equivalent, to record completion of the requirements. The pages do NOT need to be sent to the ARRT.

To document that the didactic and clinical requirements have been satisfied, candidates must have the program director (and authorized faculty member if required) sign the ENDORSEMENT SECTION of the **Application for Certification** included in the *Certification Handbook*.

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*\* Note: Candidates who complete their educational program during 2005 or 2006 may use either the previous requirements (effective 2001) or the current requirements (effective 2005). Candidates who graduate after December 2006 may no longer use the previous competency requirements.*

## How To Complete Competencies

### Student's Role:

When a student feels capable of performing one of the required exams independently, he or she should notify the Clinical Instructor, the College Instructor, or a qualified technologist, and request to be monitored in that exam for a clinical competency evaluation. If all qualified evaluators are occupied, the student must accept this and try for another time. Waiting until the end of the quarter will not guarantee availability of a qualified person to monitor competency.

### Evaluator's Role:

The Clinical Instructor, College Instructor, or a qualified technologist will try to accommodate the student's request. During the competency evaluation, the evaluator will observe the student perform the exam in an obtrusive manner. No verbal directions or manual corrections will be made in front of the patient. If adjustments are needed, direction will be given to the student away from the patient before an exposure is initiated. This is important for the student's confidence during the evaluation process and the patient's confidence in their quality of care. The one exception would be if an evaluator sees an *immediate* danger to patient safety.

When a student successfully completes all aspects of the exam as outlined on the clinical competency evaluation with no more than **two minor adjustments per projection** and no more than **four minor adjustments for the entire procedure**, the attempted competency is complete. If an error is made that would make any projection repeatable, competency is automatically denied.

Failure to successfully complete a clinical competency evaluation requires the student review and practice the exam further with the supervision of a technologist. When the student is ready to be evaluated again, the above procedure is repeated.

When a student successfully completes a competency it will be recorded on their master competency log sheet and the student may perform that exam with indirect supervision.

*The one exception to this rule is fall quarter of the first year. Students proving competency in chest, abdomen, and the one extremity must still perform those exams under **direct supervision**.*

## Competency Grading Criteria

The Clinical Education Evaluation will count as 60% of the final quarter grade. The clinical Competency Evaluations will count as 40% of the final quarter grade.

- All competency exams are worth 25 points.
- Each minor adjustment is -2 points. Two minor adjustments are allowed for each projection. More than four minor adjustments for the entire exam and the competency is not passed.
- If competency is *not* proven on the first attempt, subtract 8 points for each subsequent attempt.
- If competency is not met by the end of the quarter, 0 points will be applied to total score.

A percentage grade will be computed for the total competencies; points earned divided by points possible, multiplied by .40.

**Example: A student performs 6 competencies worth a total of 150 points and the sum of his/her scores is 140 points.**

- **Points earned (140) are divided by points possible (150) for a dividend of .93.**
- **.93 is then multiplied by .40 to obtain the 40% point value.**  
 $.93 \times .40 = .372$
- **Student receives 37.2 points for the Clinical Competency Evaluation portion of their final grade.**

Always include one decimal point to the right when doing the math for both the 40% and 60% portions of the grade. The sum of the points of the two sections should be rounded up if number to the right of the decimal is .5 or higher.

## Clinical Competency Objectives

### Radiation Protection

The student will:

- Close doors during procedure
- Collimate to part of interest or to the IR
- Use gonadal shielding on all patients
- Demonstrate use of lead aprons or gloves
- Wear dosimeter on collar
- Practice good radiation protection using optimum time, distance, and shielding
- Inquire about pregnancy of women of childbearing age

### Use of Equipment

The student will:

- Utilize tube locks when moving the tube
- Move the bucky tray utilizing the bucky lock
- Insert and remove image receptor from bucky tray
- Select proper image receptor size
- Demonstrate proper room set-up

### Technical Factor Selection

The student will:

- Select correct factors at the control panel
- Select technical factors at the proper time during the procedure
- Use a technique chart
- Measure the patient to find optimum technique
- Adapt for technique changes in SID, grid ratio, grid use, collimation, screen speed, or body habitus
- Select appropriate AEC setting when applicable

### Positioning Skills

The student will:

- Know and perform the proper routine
- Position the patient correctly to the image receptor
- Align center of part to be demonstrated to the center of the image receptor
- Center central ray to the center of the image receptor
- Angle central ray to the center of the image receptor when applicable
- Oblique patient correctly if required
- Remove unwanted anatomical parts from the area of interest

## **Image Receptor / Markers**

The student will:

- Identify the radiograph with “R” or “L” and other appropriate lead markers
- Place lead markers appropriately and outside of the body part
- Identify the image receptor with the correct patient I.D.
- Keep the ID marker out of the anatomy

## **Patient Management and Care**

The student will:

- Properly identify the patient
- Explain the procedure to the patient
- Maintain professional, caring attitude
- Communicate instructions effectively
- Effectively assists physician when applicable
- Complete the exam in a reasonable amount of time
- Administer to patient’s rights and safety at all times

## **Image Quality and Anatomy**

The student will:

- Accurately identify anatomy
- Show optimum contrast and density on the radiograph

### Student Competency Procedure Log

<b>CATEGORY 1 Chest &amp; Thorax</b>	Mandatory	Elective	Date Completed	Patient or Simulated	Verified By	First 6 <sup>th</sup> Month Recheck July - Dec.	Second 6 <sup>th</sup> Month Recheck Jan. - June
Chest Routine	✓						
Chest AP (Wheelchair or Stretcher)	✓						
Chest Routine (age 6 or younger)	✓						
Ribs	✓						
Chest Lateral Decubitus		✓					
Sternum		✓					
<b>CATEGORY 2 Extremities</b>							
Thumb or Finger	✓						
Hand	✓						
Wrist	✓						
Forearm	✓						
Elbow	✓						
Humerus	✓						
Shoulder	✓						
Trauma Shoulder (Scapular Y, Transthoracic, or Axillary)*	✓						
Trauma Upper Extremity (Non-shoulder)*	✓						
Clavicle		✓					
Scapula		✓					
AC Joints		✓					
Upper Extremity (age 6 or younger)		✓					
Foot	✓						
Ankle	✓						
Knee	✓						
Tibia-Fibula	✓						
Femur - 4 views	✓						
Trauma Lower Extremity*	✓						
Patella		✓					
Calcaneus		✓					
Toe		✓					
Lower Extremity (age 6 or younger)		✓					
<b>CATEGORY 3 Cranium</b>							
Skull	✓						
Paranasal Sinuses	✓						
Facial Bones		✓					
Orbits		✓					
Zygomatic Arches		✓					
Nasal Bones		✓					
Mandible (Panorex acceptable)		✓					

<b>CATEGORY 4 Spine &amp; Pelvis</b>	Mandatory	Elective	Date Completed	Patient or Simulated	Verified By	First 6 <sup>th</sup> Month Recheck July - Dec.	Second 6 <sup>th</sup> Month Recheck Jan. - June
Cervical Spine	✓						
Trauma Cervical Spine (Cross Table Lateral)*	✓						
Thoracic Spine	✓						
Lumbosacral Spine	✓						
Pelvis	✓						
Hip	✓						
Cross Table Lateral Hip	✓						
Sacrum and/or Coccyx		✓					
Scoliosis		✓					
Sacroiliac Joints		✓					
<b>CATEGORY 5 Abdomen &amp; Fluoroscopic Studies</b>							
Abdomen Supine (KUB)	✓						
Abdomen Decubitus or Upright	✓						
Abdomen (age 6 or younger)		✓					
Upper GI Series (Single or Double Contrast)	✓						
Barium Enema (Single or Double Contrast)	✓						
Small Bowel Series		✓					
Esophagus		✓					
<b>CATEGORY 6 Other</b>							
Intravenous Urography		✓					
Cystography/Cystourethrography		✓					
ERCP		✓					
Myelography		✓					
Arthrography		✓					
Upper Airway (Soft-Tissue Neck)		✓					
<b>CATEGORY 7 Mobile &amp; Surgical Studies</b>							
Portable Chest	✓						
Portable Abdomen	✓						
Portable Orthopedic	✓						
Mobile Study (age 6 or younger)		✓					
C-arm Procedure	✓						
Surgical Cholangiography		✓					
Retrograde Pyelography		✓					

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

## Three Competencies

### Competency Requirements

#### Three Competencies

#### First Year

<b>Fall Quarter</b>		
	<ul style="list-style-type: none"> <li>▪ Chest – Adult (2V)</li> <li>▪ KUB</li> <li>▪ One Extremity – Non-trauma/Non-pediatric</li> </ul>	(3)
<b>Winter Quarter</b>		
	<ul style="list-style-type: none"> <li>▪ Chest and Abdomen Recheck Required</li> <li>▪ Three Mandatory Competencies from Category 2</li> </ul> <p>Students may begin elective competencies winter quarter.</p>	(3)
<b>Spring Quarter</b>	<b>Five Competencies</b>	
	<ul style="list-style-type: none"> <li>▪ Five Mandatory Competencies from Category 2</li> </ul>	(5)
<b>Summer Quarter</b>	<b>Eight Competencies</b>	
	<p><b>Recheck competencies required before student performs exam under indirect supervision</b></p> <ul style="list-style-type: none"> <li>▪ Finish Mandatory Competencies from Category 2</li> <li>▪ Two Mandatory Competencies from Category 4</li> </ul> <p><b>Begin Pediatric competencies.</b></p> <p>Femur competency is four views: AP/Lat to include knee &amp; AP/Lat hip. If the femur competency is performed during the summer quarter and passed, the student will get credit for passing a hip competency also. The student cannot pass one competency without passing the other.</p> <p>Competencies performed on C-spine and L-spine must be full series. Mock additional views if necessary.</p>	(6) (2)

#### Total of 19 Mandatory Competencies – First Year

**Competency Requirements**

**Second Year**

Fall Quarter		
	<ul style="list-style-type: none"> <li>▪ Complete Mandatory Competencies from Category 4 <sup>1</sup></li> <li>▪ Two competencies from Category 5 <sup>2</sup></li> <li>▪ Complete Mandatory Competencies from Category 7 <sup>3</sup></li> </ul> <p><sup>1</sup> Competencies performed on C-spine and L-spine must be full series. Mock additional views if necessary.</p> <p><sup>2</sup> Students who prove competency on Esophagus and UGI in digital fluoro rooms must mock the following overhead views:                      Esophagus: RAO – Rt. Lateral                      UGI: AP – LPO – RAO – Rt. Lateral</p> <p><sup>3</sup> Students rotating through clinics fall quarter will complete Category 1 in place of Category 7.</p>	<p>(5) (2) (4)</p>
Winter Quarter		
	<p><b>Recheck competencies required before student performs exam under indirect supervision</b></p> <ul style="list-style-type: none"> <li>▪ Complete Category 5</li> <li>▪ Complete Mandatory Competencies from Category 3</li> <li>▪ Complete Mandatory Competencies from Category 1</li> <li>▪ Two Elective Competencies – Facial Bones &amp; Nasal Bones</li> </ul>	<p>(1) (2) (3) (2)</p>
Spring Quarter	<b>Twenty Three Competencies</b>	
	<ul style="list-style-type: none"> <li>▪ Thirteen Elective Competencies Required</li> <li>▪ Ten Terminal Mandatory Competencies Required                             <ul style="list-style-type: none"> <li>One from Category 1</li> <li>Three from Category 2</li> <li>Three from Category 4</li> <li>Three from Category 5 (one must be UGI or BE)</li> </ul> </li> </ul>	<p>(13) (10)</p>

**Total of 17 Mandatory Competencies – Second Year**

**Total of 10 Terminal Competencies – Second Year**

**Total of 15 Elective Competencies – By Program Completion**

## FOOTHILL COLLEGE RADIOLOGIC TECHNOLOGY PROGRAM Clinical Competency Evaluation

Student \_\_\_\_\_ Date \_\_\_\_\_ Procedure \_\_\_\_\_ Clinic \_\_\_\_\_

Quarter \_\_\_\_\_ 1<sup>st</sup> Year ( ) 2<sup>nd</sup> Year ( ) Competency ( ) Recheck ( )

**3 – Acceptable \* 2 – Requires Minor Improvement \*\* 1 – Unacceptable 0 – N/A**

\* More than two “2’s” for any one position requires re-evaluation.

\*\* More than four “2;s” for the exam requires re-evaluation.

\*\* A “1” in any evaluation area requires repeating the Competency Evaluation.

*Students who receive a 2 or 1 in any area with an asterisk (\*) must repeat the evaluation.*

Time competency was started: \_\_\_\_\_ Time competency was completed: \_\_\_\_\_

### Radiation Protection

### Position:

Closes doors during procedure and exposure						
Collimates to the part of interest or to the IR						
<b>* Uses gonadal shielding on all patients</b>						
Demonstrates use of lead aprons and gloves						
Wears dosimeter on collar						
<b>* Inquires about pregnancy of all women of childbearing age</b>						
Practices good radiation protection using optimum time, distance, and shielding						

### Use of Equipment

Utilizes tube locks when moving the tube						
Moves the bucky tray utilizing the bucky lock						
Inserts and removes image receptor from the bucky tray						
Selects proper image receptor size						
Accurately sets the control panel						

### Technical Factor Selection

Selects correct factors at the control panel						
Uses a technique chart						
Selects technical factors at the proper time during the procedure						
Adapts for technique changes in SID, grid ratio, grid use, collimation, or body habitus						
Selects appropriate AEC setting when applicable						
Exposure index is within proper range						

**Positioning Skills**

**Position:**

<b>* Knows and performs the proper routine</b>						
Positions the patient correctly to the image receptor						
Aligns center of part to be demonstrated to the center of the image receptor						
Centers central ray to the center of the image receptor						
Angles central ray to the center of the IR when applicable						
Obliquates patient correctly if required						
Removes unwanted anatomical parts from the area of interest						

**Image Receptor / Markers**

<b>* Identifies the radiograph with “R” or “L” and other appropriate lead markers</b>						
Places lead markers appropriately and outside the body part						
Identifies the image receptor with the correct patient ID						
Keeps the ID marker out of the anatomy						

**Patient Management and Care**

<b>* Properly identifies the patient</b>						
Explains the procedure to the patient						
Maintains a professional, caring attitude						
Communicates instructions carefully						
Effectively assists physician when applicable						
Completes exam in a reasonable amount of time						
<b>* Administers to patient’s rights and safety at all times</b>						

**Image Quality and Anatomy**

<b>* Accurately identifies anatomy</b>						
Image shows optimum contrast and density						

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

Pass ( )      Score        / 25      Retest ( )             - 8

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

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

## Digital Competency

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

### Image Receptor Identification

The student will be able to:

Performed Omitted

Identify the IR with patient information using barcode or manual entry		
Select exam to be performed		
Select patient orientation if applicable		
Select IR orientation if applicable		
Verify all exam and patient information		
Place IR into reader if applicable		

### Post Processing

The student will be able to:

Performed Omitted

Retrieve images to work station computer		
Orient images correctly		
Annotate images with markers and/or comments		
Identify window level tool if applicable		
Change patient information if applicable		
Change exam information if applicable		
Check exposure number (LgM, S, REX, etc.) or range to confirm IR was neither over or under exposed		
Identify post collimate		
Save the exam		
Send the exam to archiving system		
Print images if applicable		

Student \_\_\_\_\_ Date \_\_\_\_\_

Technologist \_\_\_\_\_

## NURSING PROCEDURES OBJECTIVES

**The student will be able to pass with 85% or better a standard written quiz and a practical skills test on nursing procedures.**

**Part I:** For the written test the student will be able to describe:

1. What is considered a normal adult blood pressure.
2. The definitions of systolic and diastolic pressure.
3. The range of a normal adult respiration rate.
4. The range of a normal adult pulse rate.
5. The location of the Emergency Cart, oxygen tank and suction machine.
6. The protocol for initiating each of the following codes:  
cardiac arrest, fire and bomb threat
7. The correct placement of the patient's urinary bag and an explanation of the reason for placement.
8. The correct height of an I.V. bottle and an explanation of the reason for placement.
9. Where one would find information related to patients' isolation procedures in the radiology department and on portables.
10. Department isolation protocol

**Part Two:** For the skills test the student will be able to:

1. Take a blood pressure
2. Take a pulse
3. Take a respiration
4. Set up oxygen for use
5. Set up suction machine for use
6. Set up an I.V. solution and tubing

## NURSING PROCEDURES QUIZ

Name \_\_\_\_\_ Date \_\_\_\_\_ Clinic \_\_\_\_\_

1. What is the range for a normal adult blood pressure?
2. Regarding question #1, name the medical term for the top number and define it in the space below.
3. State the range for a normal adult respiration rate.
4. What is the range for a normal adult pulse rate?
5. State the location(s) for each piece of emergency equipment:  
Crash Cart  
Oxygen Tank  
Suction Machine
6. What is the protocol for initiating each of the following codes?  
Cardiac Arrest:  
Fire:  
Bomb Threat:
7. Where are the fire extinguishers located?
8. What is the correct placement of the patient's urinary bag and why?
9. How high should the I.V. bottle be elevated and why?
10. Where would one find information related to a patient's isolation procedure:  
in the radiology department?  
on a portable?

## NURSING PROCEDURES QUIZ

### KEY

1. Normal adult blood pressure: **systolic: 110-140; diastolic: 60-80**
2. Medical term for the top number: **systolic.**  
Definition: **The highest pressure exerted on the arterial wall when blood is ejected from the left ventricle.**
3. Range for normal adult respiration rate: **12-30 /minute.**
4. Range for normal adult pulse rate: **60-90/minute.**
- 5 -7. Answers to these questions are intrinsic to each affiliate.
8. The patient's urinary bag should be placed below the level of the bladder to prevent infection caused by back flow.
3. An I.V. bottle should be elevated 18-24 inches above the vein. This prevents back flow of blood into the I.V. tubing. Also, the height of the solution affects the rate of flow.
4. Answer to this question is intrinsic to the individual affiliate.

## Nursing Procedures: Vital Signs and Medical Equipment Competency

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

PASS / FAIL

	Performed	Omitted
<b>Pulse &amp; Respiration</b>		
❖ Have patient sit or lie down		
❖ Inform patient you are going to count pulse		
❖ Place index and middle fingers over radial artery		
❖ Count for 30 seconds		
❖ Count respiration while fingers are still over radial artery		
❖ Do not tell patient you are counting respirations		
<b>Blood Pressure</b>		
❖ Explain procedure to patient while waiting for patient to be at rest for awhile		
❖ Place patient in comfortable position with arm extended, palm facing up and arm comfortably supported		
❖ Wrap cuff snugly around upper arm, 2" above brachial artery		
❖ Place sphygmomanometer on level surface so it can be easily read		
❖ Close the valve on the air pump		
❖ Find the pulse of the brachial artery with fingertips		
❖ Place stethoscope tips in ears and place bell over artery		
❖ Pump air into cuff until pressure valve reads approximately 160		
❖ Open valve slowly and watch needle of gauge move slowly down numerically		
❖ When diastolic pressure is no longer audible, release all pressure in the cuff		
❖ Remove cuff		
❖ Record the blood pressure		
<b>Oxygen &amp; Suction</b>		
❖ Turn on main valve of oxygen		
❖ Regulate flow of oxygen to proper value		
❖ Locate on/off switch and regulator		
❖ Inspect proper tubing attachments		
❖ Observe proper clean-up techniques		
<b>IV Set-Up</b>		
❖ Engage IV tubing into IV bottle and bleed fluid to end of line		

Student \_\_\_\_\_ Technologist \_\_\_\_\_

Date \_\_\_\_\_

Student must pass the nursing procedures evaluation with a 100%. Students receiving a failing mark must repeat the procedure is passed. A failing mark will lower the student's grade one grade in Patient Care.

## Off-Hour Clinical Assignment Objectives

Expected Outcomes:

The student will be able to:

1. Recognize the management hierarchy during off-hour assignments.
2. Work effectively as a team member during after hours, weekend or emergency room situations.
3. Communicate effectively with nurses, doctors, and other health care providers during after hours, weekend or emergency room situations.
4. Communicate effectively with patients during emergency or trauma situations.
5. Recognize proper methods for initiating after hours, weekend or emergency room procedures.

Expanded Outcomes:

The student will be able to:

1. Recognize the management hierarchy during off-hour assignments.
  - a. Reports to clinical supervisor at beginning of shift.
  - b. Informs clinical supervisor of whereabouts at all times.
  - c. Identifies radiologist on-call
  - d. Identifies nursing and support personnel
  - e. Works under direct supervision at all times.
2. Work effectively as a team member during after hours, weekend or emergency room situations
  - a. Follows directions effectively.
  - b. Demonstrates initiative.
  - c. Anticipates what is needed during the exam.
  - d. Demonstrates judgment and decision making skills during non-traditional procedures.
  - e. Takes action to get help or assistance during emergency.
  - f. Observes and assists during off-hour in-patient, outpatient and emergency room procedures.
  - g. Participate in the departmental responsibilities of technologists during off-hour shifts.
3. Communicate effectively with nurses, doctors, and other health care providers during after hours, weekend or emergency room situations.
  - a. Initiate emergency codes
  - b. Recognizes phone numbers of other departments.
  - c. Identifies protocols for exam initiation and completion.
  - d. Communicates clearly, calmly and accurately during stressful procedures.
  - e. Projects professional behavior at all times.

4. Communicate effectively with patients during emergency or trauma situations.
  - a. Communicates in a supportive manner while working at an efficient pace.
  - b. Understands the importance of obtaining the patient's cooperation during emergency procedures.
  - c. Demonstrates empathy and understanding with emergency and after hours patients.
  - d. Gives patients clear instructions during exam.
  - e. Maintains confidentiality when speaking to family members or the public.
  
5. Recognize proper methods for initiating after hours, weekend or emergency room procedures.
  - a. Recognizes how the radiology department is notified of after hours or weekend in-patient, outpatient or emergency procedures.
  - b. Participates in patient and exam prioritizing during off-hour assignments.
  - c. Demonstrates an understanding of the requisition and image management system during off-hour assignments.

## Off-Hour Clinical Assignment Competency

Student Name \_\_\_\_\_ Clinical Facility \_\_\_\_\_

Supervisor Name \_\_\_\_\_ Supervisor Signature \_\_\_\_\_

Dates of Off-Hour Rotation \_\_\_\_\_

Times of Off-Hour Rotation \_\_\_\_\_

1. Recognized Management hierarchy during off-hour assignment

Performed Omitted

- A. Reported to clinical supervisor at beginning of shift
- B. Informed clinical supervisor of whereabouts at all times
- C. Identified radiologist on call
- D. Identified nursing and support personnel
- E. Worked under direct supervision at all times



Comments:

2. Worked effectively as a team member during after hours, weekend or emergency room situations.

Performed Omitted

- A. Followed directions effectively
- B. Demonstrated initiative
- C. Anticipated what was needed during exams
- D. Demonstrated judgment and decision making skills during non-traditional procedures
- E. Took action to get help or assistance during emergency
- F. Observed and assisted during off-hour in-patient, outpatient and emergency room procedures
- G. Participated in departmental responsibilities of during off-hour shifts



Comments:

3. Communicated effectively with nurses, doctors, and other health care providers during after hours, weekend or emergency room situations.

Performed Omitted

- A. Demonstrated knowledge on how to initiate emergency codes
- B. Recognized phone numbers of other departments
- C. Identified protocols for exam initiation and completion
- D. Communicated clearly, calmly and accurately during stressful procedures
- E. Projected professional behavior at all times


Comments:

4. Communicated effectively with patients during emergency or trauma situations.

Performed Omitted

- A. Communicated in a supportive manner while working at an efficient pace.
- B. Demonstrated the ability to obtain the patient's cooperation during emergency procedures.
- C. Demonstrated empathy and understanding with emergency and after hours patients.
- D. Gave patients clear instructions during procedures
- E. Maintained confidentiality when speaking to family members or the public


Comments:

5. Recognized proper methods for initiating after hours, weekend or emergency room procedures.

Performed Omitted

- A. Recognized how the radiology department is notified of after hours or weekend in-patient, outpatient or emergency procedures
- B. Participates in-patient and exam prioritizing during off-hour assignments.
- C. Demonstrates an understanding of the requisition and image management system during off-hour assignments.


Comments:

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

Technologist's Signature \_\_\_\_\_

## Operating Room and C-arm Competency

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

### Equipment set-up and use

	Performed	Omitted
Plug in monitor cart cable to the C-arm		
Plug in the footswitch		
Plug in the C-arm power cord to the grounded wall outlet.		
Power up the C-arm		
Enter the patient information on the monitor cart computer		
Identify how to initiate an exposure		
Set a manual technique		
Recognize how to flip an image		
Recognize how to rotate an image		
Adjust the collimation		
Adjust the window and level (Contrast and Brightness)		
Save an image on the C-arm		
Initiate the brake on the C-arm and the monitor cart		
Raise and lower the C-arm column.		
Recognize how to use the In/Out, Wig Wag, Flip Flop, Arc rotation and C-arm rotation.		
Positions the monitor cart to provide optimal viewing for the surgeon.		
Identify the x-ray tube end vs. the Image Intensifier end of the C-arm.		
Examines the OR table for possible obstructions or artifacts.		
Avoids creating a tripping hazard with cords and cables.		
Safely moves the C-arm around the patient for AP and Lateral views.		
Avoids collisions with the surgical staff when moving into position.		
Avoids collisions when moving the C-arm through doorways and corridors		
Uses mirror balls, and calls out when going around “blind” corners.		
Places a red bag over the lower end of the C-arm to protect from fluids.		
Uses universal precautions whenever bodily fluids may be present		

### Radiation Protection

	Performed	Omitted
Wears personal radiation monitor at the level of the thyroid		
Watches for personnel entering the area without appropriate lead shielding.		
Verifies that the nurse has shielded the patient appropriately.		
Collimates to the patient’s anatomy on all images.		
Inquires about the patient’s pregnancy status.		
Maintains appropriate “should” distance whenever possible.		
Maintains the “shall” distance at all times.		

**Sterile Protocols**

	Performed	Omitted
Assists with the sterile draping of the C-arm		
Can identify sterile fields		
Avoids contaminating sterile fields and follows sterile protocols		
Waits for “scrubbed in” staff to drape the C-arm before full rotation to the lateral view.		
Cleans the C-arm with disinfectant after each use.		

**Punctuality and Dependability**

	Performed	Omitted
Changes into the O.R. scrubs promptly		
Reports to their assigned tech promptly		
Demonstrates flexibility		
Communicates whereabouts with the O.R. lead tech		
Observes length of breaks and lunch		

**Coworker/Hospital Relationships**

	Performed	Omitted
Tactful and courteous		
Demonstrates initiative		
Demonstrates team approach		
Accepts constructive criticism		
Projects professionalism		
Communicates effectively and appropriately		
Follows directions/asks for clarification if uncertain		
Contributes to a pleasant working environment		
Adheres to the O.R. dress code		
Avoids creating distractions and/or disturbances		
Doesn't interfere with O.R. staff member's work.		

**Job Performance**

	Performed	Omitted
Knows how to annotate patient information to mark images		
Has organized work pattern		
Is alert and interested		
Maintains focus and avoids distractions		
Demonstrates confidence		
Uses good judgment		
Communicates effectively		
Follows verbal instructions with multiple steps		
Waits for the appropriate time to ask questions or make comments		

**Technical Factors**

	Performed	Omitted
Knows how to set a manual technique on the C-arm		
Evaluates patient technically/asks anesthesiologist for patient size when appropriate		
Can identify and correct technical errors		
Centers the anatomy to the photocell on the C-arm		

**Positioning**

	Performed	Omitted
Knows the department routines		
Knows the positioning criteria		
Adapts positioning criteria to C-arm limitations		
Identifies image anatomy		
Instructs assistant in proper positioning		
Requests respiratory suspension when appropriate		

Student \_\_\_\_\_ Date \_\_\_\_\_

Technologist \_\_\_\_\_

## Patient Movement and Transfer Objectives

Expected Outcomes:

The student will be able to:

1. Correctly identify patient (using two identifiers)
2. Escort patient from waiting area to imaging room
3. Walk next to patient to be able to catch if patient is falling
4. Safely assist ambulatory patient onto radiographic table
5. Maintains physical contact while patient climbs on step stool and sits on table
6. Safely assists ambulatory patient off of radiographic table
7. Safely transports patient in wheelchair
8. Uses wheelchair locks and footrests properly
9. Safely assists patient from wheelchair to radiographic table
10. Safely assists patient from radiographic table to wheelchair
11. Identifies and properly utilizes all gurney locks and accessories
12. Safely maneuvers gurney around corners and through doorways
13. Ensure all catheters, IVs and monitoring equipment will transfer safely and without pulling
14. Utilizes side rails properly
15. Properly transfers patient from gurney to radiographic table with available transfer devices.
16. Properly transfers patient from radiographic table to gurney with available transfer devices.

Expanded Outcomes:

1. Correctly identify and escort a patient from waiting area to the radiographic room.
  - a. Introduce self.
  - b. Properly identify patient using two forms of identification.
  - c. Use patient's proper name; Ms., Mr., Mrs.
  - d. Maintain sight and awareness of patient. Walk with patient, not ahead of them.
  - e. Offer physical support for patients who are not steady.
2. Safely assist a patient onto a radiographic table.
  - a. Explain to patient where they will be positioned on the x-ray table.
  - b. Maintain physical contact and assist patient onto the step stool.
  - c. Maintain physical contact and assist patient to sitting position on the edge of the table.
  - d. Support the patient's head and assist with lifting legs when lying the patient down in the supine position.
3. Safely assist a patient off a radiographic table.
  - a. Explain to patient that you will be assisting them off the table.
  - b. Position step stool close to the table.
  - c. Support the patient's head and assist with lifting legs to a sitting position on the edge of the table.
  - d. Maintain physical contact and allow patient to sit for a minute and inquire if they are dizzy or lightheaded.
  - e. Maintain physical contact and assist patient to step stool and floor.
  - f. Assess patient's stability and walk with them to dressing room.
4. Safely transport a patient in a wheelchair.
  - a. Introduce self while facing the patient.

- b. Ensure patients arms and elbows are inside the armrests.
  - c. Ensure patient's feet are on the footrests.
  - d. Ensure all lines, catheters and monitoring equipment will transport without pulling.
  - e. Unlock wheelchair.
  - f. Push wheelchair slowly and smoothly.
  - g. Lock wheel chair when reaching destination.
5. Safely assist a patient from a wheelchair to a standing position.
- a. Assess patient's ability to stand. Determine if you need assistance.
  - b. Face wheelchair in direction where patient is required to stand.
  - c. Lock wheelchair.
  - d. Raise footrests.
  - e. Ensure all lines, catheters and monitoring equipment will transfer without pulling.
  - f. Maintaining physical contact and support while assisting patient to a standing position.
  - g. While maintaining physical contact reassess patient's ability to stand unassisted.
  - h. Walk with patient to desired location.
6. Safely assist a patient from a standing position into a wheelchair.
- a. Place chair close to patient.
  - b. Lock wheels.
  - c. Ensure footrests are up.
  - d. Ensure all lines, catheters and monitoring equipment will transfer without pulling.
  - e. Ensure patient is close to chair before sitting.
  - f. Assist to sitting position while insuring chair will remain stable.
  - g. Adjust footrests.
7. Safely assist a patient from a wheelchair onto a radiographic table.
- a. Assess patient's ability to stand. Determine if you need assistance.
  - b. Place wheelchair along side of radiographic table facing the step stool.
  - c. Lock wheelchair.
  - d. Raise footrests.
  - e. Ensure all lines, catheters and monitoring equipment will transfer without pulling.
  - f. Maintaining physical contact and support assist patient to a standing position.
  - g. Before releasing patient reassess patients ability to stand unassisted.
  - h. If unable to stand unassisted seat the patient and call for assistance.
  - i. Maintain physical contact and assist patient onto the step stool.
  - j. Maintain physical contact and assist patient to sitting position on the edge of the table.
  - k. Support the patient's head and assist with legs when lying the patient down in the supine position.
8. Safely assist a patient from a radiographic table into a wheelchair.
- a. Explain to patient that you will be assisting them off the table.
  - b. Place chair close to radiographic table. Lock wheels. Raise footrest.
  - c. Position step stool close to the table.
  - d. Ensure all lines, catheters and monitoring equipment will transfer without pulling.
  - e. Support the patient's head and assist with adjusting legs to a sitting position on the edge of the table.
  - f. Allow patient to sit for a minute and inquire if they are dizzy or lightheaded.

- g. Maintain physical contact and assist patient to step stool and floor.
  - h. Maintain physical contact and ease patient to sitting position in wheelchair.
  - i. Adjust footrests.
9. Identify and properly utilize gurney locks and accessories.
    - a. Recognize different gurney types used in the hospital.
    - b. Identify and manipulate all locks.
    - c. Identify and manipulate all types of safety rails.
    - d. Identify how to raise and lower patient's head.
  10. Safely maneuver gurneys.
    - a. Push gurney with patient's head close to you, directing the feet first.
    - b. Ensure patient's hands and arms are inside gurney perimeters.
    - c. Ensure all lines, catheters and monitoring equipment will transport without pulling.
    - d. Back into elevators with patient's head going in first.
    - e. Master turning corners and directing the gurney in a straight line.
  11. Properly transfer patients from a gurney to the radiographic table.
    - a. Determine the number of people for a safe patient transfer. At least two preferably three people.
    - b. Explain the move to the patient.
    - c. Remove table pad and pillow.
    - d. Adjust table and/or gurney heights.
    - e. Adjust gurney slightly higher than table.
    - f. Lock gurney and table in place.
    - g. Have patient cross arms over chest.
    - h. Ensure all lines, catheters and monitoring equipment will transfer without pulling.
    - i. Position one person on the side of the gurney away from the table. This person ensures gurney stability with their body weight. Position the second person on the opposite side of the radiographic table. The third person should guide the head and watch the lines.
    - j. First person will roll patient towards them a quarter turn to enable the slider to be positioned under patient.
    - k. The second (and third) person will pull the patient onto slider. Never push patient onto slider.
    - l. Ensure the patient is securely on the radiographic table before unlocking and removing the gurney.
  12. Properly transfer patients from radiographic table to gurney.
    - a. Determine the number of people for a safe patient transfer. At least two preferable three people for gurney transfer.
    - b. Explain the move to patient.
    - c. Adjust table and/or gurney heights.
    - d. Adjust gurney slightly lower than table.
    - e. Lock gurney and table in place.
    - f. Have patient cross arms over chest.
    - g. Ensure all lines, catheters and monitoring equipment will transfer without pulling.
    - h. Position one person on the side of the gurney away from the table. This person ensures gurney stability with their body weight. Position the second person on the

opposite side of the radiographic table. The third person should guide the head and watch the lines.

- i. Second person will roll patient towards them a quarter turn to enable the slider to be positioned under patient.
- j. The first (and third) person will pull the patient onto slider. Never push patient onto slider.
- k. Ensure the patient and lines are securely on the gurney before unlocking and moving the gurney.
- l. Replace safety rails.

## Patient Movement and Transfer Competency

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

### Ambulatory Patient:

	Performed	Omitted
Correctly identifies patient (using two identifiers)		
Escorts patient from waiting area to imaging room		
Walk next to patient to be able to catch if patient is falling		
Safely assists ambulatory patient onto radiographic table		
Maintains physical contact while patient climbs on step stool and sits on table		
Safely assists ambulatory patient off of radiographic table		

### Wheelchair Patient:

Safely transports patient in wheelchair		
Uses wheelchair locks and footrests properly		
Safely assists patient from wheelchair to radiographic table		
Safely assists patient from radiographic table to wheelchair		

### Gurney Patient:

Identifies and properly utilizes all gurney locks and accessories		
Safely maneuvers gurney around corners and through doorways		
Ensure all catheters, IVs and monitoring equipment will transfer safely and without pulling		
Utilizes side rails properly		
Properly transfers patient from gurney to radiographic table with available transfer devices. Please list transfer devices here:		
1.		
2.		
3.		
4.		
5.		
Properly transfers patient from radiographic table to gurney with available transfer devices.		

### Comments:

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\_\_\_\_\_  
Clinical Instructor

\_\_\_\_\_  
Student

## Sterile and Aseptic Technique Competency

The instructor or designated technologist will review hospital protocol for infectious disease and perform isolation techniques with the students.

1. Review hospital protocol for infectious disease.
2. Demonstrate isolation procedures for a portable chest using the clean tech/dirty tech method.
  - Supplies needed for an isolation procedure:

Gown	Gloves
Mask	Bonnet
Shoe Covers	Pillowcase
3. Demonstrate the setting up of a sterile tray
  - Putting on sterile gloves, gowns and masks using sterile technique
  - Opening a sterile tray and working around it without contamination
  - Adding sterile objects to a sterile tray

The student will:

4. Mock position for a portable chest using isolation procedures.
5. Put on sterile gloves, gowns and masks using sterile technique.
6. Demonstrate opening a sterile tray and placing sterile objects on the tray without contaminating the sterile field.

Student \_\_\_\_\_ Date \_\_\_\_\_

Technologist \_\_\_\_\_

## **Angiography Clinical Objectives**

**By the end of the one-week Angiography rotation the student will be able to:**

### **Preliminary Exam Preparation**

Properly evaluate the requisition.

Demonstrate room readiness.

Accurately enter the patient information.

Displays punctuality and dependability.

### **Patient Care and Handling**

Demonstrate professionalism.

Identify the correct patient and introduce self.

Assist patients on and off the table.

Communicate effectively with the patient and staff.

Understand how to work within or around the sterile field.

Identify pertinent equipment used during the procedure: catheters, guide wires, dilators.

Discuss sedation analgesia with the nurse and gain understanding of the medications used.

### **Imaging Techniques**

Effectively set up automatic injector.

Assist with positioning of patient for imaging sequences.

Accurately identify equipment controls.

Correctly identifies major arteries of the head and neck, the aorta and its main branches, major arteries of the upper and lower extremities.

### **Imaging and Image Manipulation**

Correctly records, archives, and processes images.

Identifies means by which images are presented to the radiologist for interpretation.

Demonstrates an understanding of post-procedure care.

## Angiography Checklist

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

Please use this checklist to orientate the student to the angio environment.

Activity	Performed	Initial & Date
<b>Department Information</b>		
Identify department location		
Introduction to staff		
Explain patient scheduling and registration		
Discuss angio requisition		
Locate patient dressing area		
<b>Patient Care &amp; Preparation</b>		
Review patient prep – advanced prep <ul style="list-style-type: none"> <li>▪ Dietary restrictions</li> <li>▪ Lab work such as BUN, creatinine levels, PT, PTT</li> <li>▪ History and Physical, vital signs</li> <li>▪ Pre-medication</li> </ul>		
Review patient prep – immediately preceding examination <ul style="list-style-type: none"> <li>▪ Patient identification</li> <li>▪ Consent</li> <li>▪ Correct site identification</li> <li>▪ Site preparation (locate pulse, shave, disinfect)</li> </ul>		
<ul style="list-style-type: none"> <li>▪ Demonstrate techniques used when “scrubbing in”:</li> <li>▪ Open and set up of sterile tray</li> <li>▪ Identify all pre-packaged items on tray</li> <li>▪ Identify all items that need to be added to the tray</li> </ul>		
<b>Discuss Role of Radiology Nurse</b>		
Discuss conscious sedation: <ul style="list-style-type: none"> <li>▪ Types of sedatives used</li> <li>▪ Dosage</li> <li>▪ Administration route</li> <li>▪ Documentation</li> </ul>		
Post procedure care: <ul style="list-style-type: none"> <li>▪ Pressure to puncture site</li> <li>▪ Patient monitoring</li> <li>▪ Immobilization</li> </ul>		
<b>Equipment</b>		
Discuss overall room readiness		
Demonstrate aspects of the console to include: <ul style="list-style-type: none"> <li>▪ kVp and mAs selection</li> <li>▪ Timing of imaging sequences to coincide with contrast injection and anatomy to be imaged</li> <li>▪ Selection of focal spot sizes</li> <li>▪ Selection of magnification modes</li> </ul>		
Identify components of the fluoroscopy equipment: <ul style="list-style-type: none"> <li>▪ Single versus biplane</li> </ul>		

<ul style="list-style-type: none"> <li>▪ C/arm angulation to include oblique and craniocaudal positioning</li> <li>▪ Table movement</li> <li>▪ Radiation protection devices</li> </ul>		
Review of techniques and devices used during procedure to include: <ul style="list-style-type: none"> <li>▪ Discuss Seldinger technique and needles</li> <li>▪ Guide wires, catheters, dilators, adaptors, stopcocks, injector tubing</li> </ul>		
Pressure injector: <ul style="list-style-type: none"> <li>▪ Types and amounts of contrast agent used</li> <li>▪ Loading injector</li> <li>▪ Heating cuff</li> <li>▪ Controls on injector head</li> <li>▪ Controls on injector console (flow rate, PSI, volume, etc.)</li> <li>▪ Documentation of contrast usage</li> </ul>		
Set up the imaging equipment (in angio suite) for the following procedures: <ul style="list-style-type: none"> <li>▪ Intracranial studies</li> <li>▪ Aortic arch, common carotid, vertebral studies</li> <li>▪ Upper and lower extremities</li> <li>▪ Abdominal/pelvic studies</li> </ul>		
Review accessory equipment to include, but not limited to: <ul style="list-style-type: none"> <li>▪ Contrast warmers, pulse oximeter, O<sub>2</sub>, suction, EKG, display monitors</li> </ul>		
Locate emergency crash cart		
Discuss procedure for calling a code		
<b>Imaging Procedures</b>		
Discuss how images are obtained and displayed for radiologist interpretation.		
Discuss arterial anatomy: <ul style="list-style-type: none"> <li>▪ Aortic arch, neck, head, abdominal aorta and main branches, pelvis, and the major vessels of the upper &amp; lower extremities</li> </ul>		
Review quality assurance mechanisms		
<b>Other</b>		
Review angio clinical objectives and competency forms		
Discuss documentation before, during and after the procedure to include charging and coding requirements		
<b>Optional</b>		
Cardiac Cath Lab <ul style="list-style-type: none"> <li>▪ Radiographic equipment (single vs. biplane c/arm) and imaging techniques</li> <li>▪ Monitoring devices, contrast agents, catheters, guide wires</li> <li>▪ Overview of diagnostic vs. interventional procedures</li> <li>▪ Basic arterial anatomy</li> </ul>		

## **Angiography Competency**

Unacceptable = 1                      Requires Improvement = 2                      Acceptable = 3  
By the end of the one-week Angiography rotation the student will be able to:

### **Preliminary Exam Preparation**

- 1 2 3 \_\_\_\_ Properly evaluate the requisition.
- 1 2 3 \_\_\_\_ Demonstrate room readiness.
- 1 2 3 \_\_\_\_ Accurately enter the patient information.
- 1 2 3 \_\_\_\_ Displays punctuality and dependability.

### **Patient Care and Handling**

- 1 2 3 \_\_\_\_ Demonstrate professionalism.
- 1 2 3 \_\_\_\_ Identify the correct patient and introduce self.
- 1 2 3 \_\_\_\_ Assist patients on and off the table.
- 1 2 3 \_\_\_\_ Understand how to work within or around the sterile field.
- 1 2 3 \_\_\_\_ Identify pertinent equipment used during the procedure: catheters, guide wires, dilators.
- 1 2 3 \_\_\_\_ Discuss sedation analgesia with the nurse and gain a basic understanding of the medications used.
- 1 2 3 \_\_\_\_ Effectively communicate with the patient and staff.

### **Imaging Techniques**

- 1 2 3 \_\_\_\_ Effectively set up automatic injector.
- 1 2 3 \_\_\_\_ Assist with positioning of patient for imaging sequences.
- 1 2 3 \_\_\_\_ Accurately identify equipment controls.
- 1 2 3 \_\_\_\_ Correctly identifies major arteries of the head and neck, the aorta and its main branches, major arteries of the upper and lower extremities.

**Filming and Image Manipulation**

1 2 3 \_\_\_\_\_ Correctly records, archives, and processes images.

1 2 3 \_\_\_\_\_ Identifies means by which images are presented to the radiologist for interpretation.

1 2 3 \_\_\_\_\_ Demonstrates an understanding of post-procedure care.

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

\_\_\_\_\_  
Student

\_\_\_\_\_  
Angiography Supervisor

\_\_\_\_\_  
Date

## **COMPUTED TOMOGRAPHY CLINICAL OBJECTIVES**

**By the end of the one week CT rotation the student will be able to:**

### **Preliminary Exam Preparation**

Properly evaluate the requisition.

Demonstrate room readiness.

Accurately enter the patient information.

### **Patient Care and Handling**

Demonstrate professionalism.

Identify the correct patient and introduce self.

Obtain history and provide examination instructions.

Assist patients on and off the table.

Communicate effectively with the patient and staff.

### **Scanning Techniques**

Effectively set up IV system.

Demonstrate proper positioning of patient for brain, chest, and abdomen.

Accurately utilizes equipment controls.

Demonstrates speed and accuracy in scanning.

Correctly identifies basic anatomy for brain, chest, and abdomen.

### **Filming and Image Manipulation**

Demonstrates proper image labeling and windowing.

Correctly records, archives and processes images.

## Computed Tomography Checklist

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

Please use this checklist to orientate the student to the CT environment.

Activity	Performed	Initial & Date
<b>Department Information</b>		
Identify department location		
Introduction to staff		
Explain patient scheduling and registration		
Discuss CT requisition		
Locate patient dressing area		
Review informed consent form		
Discuss patient history form		
Review patient prep		
Evaluate patient lab results as per hospital protocol		
<b>Equipment &amp; Scan Room</b>		
Discuss scan room readiness		
Identify components of the equipment		
Locate important supplies (blankets, linens, IV supplies, etc.)		
Locate gantry		
Demonstrate gantry controls		
Perform couch movements		
Demonstrate how to change the head holder		
Locate contrast media injector		
Demonstrate filling the contrast media injector		
Identify and discuss contrast media used in the CT department		
Locate emergency crash cart, oxygen, and suction.		
Discuss procedure for calling a code.		
Review technologist control area		
Discuss keyboard / mouse functions		
Explain patient log		
<b>Image Processing</b>		
Demonstrate proper image recording and processing procedures		
Review image labeling and windowing		
<b>Scanning Techniques</b>		
Review examination protocols		
Explain patient positioning (brain, chest, abdomen)		
Identify basic anatomy (brain, chest, abdomen)		
Review CT clinical objectives and competency forms		

## Computed Tomography Competency

Unacceptable = 1                      Requires Improvement = 2                      Acceptable = 3  
By the end of the one week CT rotation the student will be able to:

### **Preliminary Exam Preparation**

- 1 2 3 \_\_\_\_\_ Properly evaluate the requisition.
- 1 2 3 \_\_\_\_\_ Demonstrate room readiness.
- 1 2 3 \_\_\_\_\_ Accurately enter the patient information.
- 1 2 3 \_\_\_\_\_ Displays punctuality and dependability.

### **Patient Care and Handling**

- 1 2 3 \_\_\_\_\_ Demonstrate professionalism.
- 1 2 3 \_\_\_\_\_ Identify the correct patient and introduce self.
- 1 2 3 \_\_\_\_\_ Obtain history and provide examination instructions.
- 1 2 3 \_\_\_\_\_ Assist patients on and off the table.
- 1 2 3 \_\_\_\_\_ Effectively communicate with the patient and staff.

### **Scanning Techniques**

- 1 2 3 \_\_\_\_\_ Effectively set up IV system.
- 1 2 3 \_\_\_\_\_ Demonstrate proper positioning of patient for brain, chest, and abdomen.
- 1 2 3 \_\_\_\_\_ Accurately utilizes equipment controls.
- 1 2 3 \_\_\_\_\_ Demonstrates speed and accuracy in scanning.
- 1 2 3 \_\_\_\_\_ Correctly identifies basic anatomy for brain, chest, and abdomen.

### **Filming and Image Manipulation**

- 1 2 3 \_\_\_\_\_ Demonstrates proper image labeling and windowing.
- 1 2 3 \_\_\_\_\_ Correctly records, archives, and processes images.

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

\_\_\_\_\_  
Student

\_\_\_\_\_  
CT Technologist

\_\_\_\_\_  
Date

## **MAGNETIC RESONANCE IMAGING CLINICAL OBJECTIVES**

**By the end of the one week MR rotation the student will be able to:**

### **Preliminary Exam Preparation**

Properly evaluate the requisition.

Demonstrate room readiness.

Accurately enter the patient information.

### **Patient Care and Handling**

Demonstrate professionalism.

Identify the correct patient and introduce self.

Review screening form, obtain history and provide exam explanation.

Assist patients on and off the table.

Communicate effectively with the patient and staff.

### **Scanning Techniques**

Effectively set up IV system if needed.

Demonstrate proper positioning of patient for head, lumbar, and knee.

Accurately utilizes equipment controls.

Demonstrates speed and accuracy in scanning.

Correctly identifies basic anatomy for head, lumbar, and knee.

### **Filming and Image Manipulation**

Demonstrates proper image labeling and filming.

Correctly records, archives and processes images.

**Magnetic Resonance Imaging Checklist**

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

**Please use this checklist to orientate the student to the MRI environment.**

<b>Activity</b>	<b>Performed</b>	<b>Initial &amp; Date</b>
<b>Department Information</b>		
Identify department location		
Introduction to staff		
Explain patient scheduling and registration		
Discuss MR requisition		
Locate patient dressing area		
Explain tesla and gauss		
Review informed consent form		
Discuss patient history and screening forms		
Review patient prep		
Explain the hazards / risks associated with MRI		
<b>Equipment &amp; Scan Room</b>		
Discuss scan room readiness		
Identify safety gauss lines		
Identify major components of the equipment		
Locate important supplies (blankets, linens, IV supplies, etc.)		
Review magnet and oxygen alarm systems		
Discuss types of coils and their uses		
Perform table movements		
Demonstrate how to change surface coils		
Locate contrast media injector		
Demonstrate filling the contrast media injector		
Identify and discuss contrast media used in the MR department		
Locate emergency crash cart, oxygen, and suction.		
Discuss procedure for calling a code.		
Review technologist control area		
Discuss keyboard / mouse functions		
Explain patient log		
<b>Image Processing</b>		
Demonstrate proper image recording and processing procedures		
Review image labeling and filming		

<b>Scanning Techniques</b>		
Review examination protocols		
Discuss pulse sequences and basic MR principles		
Explain patient positioning (brain, lumber, knee)		
Identify basic anatomy (brain, lumber, knee)		
Review MRI clinical objectives and competency forms		

## Magnetic Resonance Imaging Competency

Unacceptable = 1                  Requires Improvement = 2                  Acceptable = 3  
By the end of the one-week MR rotation the student will be able to:

### Preliminary Exam Preparation

- 1 2 3 \_\_\_\_\_ Properly evaluate the requisition.
- 1 2 3 \_\_\_\_\_ Demonstrate room readiness.
- 1 2 3 \_\_\_\_\_ Accurately enter the patient information.
- 1 2 3 \_\_\_\_\_ Displays punctuality and dependability.

### Patient Care and Handling

- 1 2 3 \_\_\_\_\_ Demonstrate professionalism.
- 1 2 3 \_\_\_\_\_ Identify the correct patient and introduce self.
- 1 2 3 \_\_\_\_\_ Review screening form, obtain history and provide exam explanation.
- 1 2 3 \_\_\_\_\_ Assist patients on and off the table.
- 1 2 3 \_\_\_\_\_ Effectively communicates with the patient and staff.

### Scanning Techniques

- 1 2 3 \_\_\_\_\_ Effectively set up IV system if needed.
- 1 2 3 \_\_\_\_\_ Demonstrate proper positioning of patient for head, lumbar, and knee.
- 1 2 3 \_\_\_\_\_ Accurately utilizes equipment controls.
- 1 2 3 \_\_\_\_\_ Demonstrates speed and accuracy in scanning.
- 1 2 3 \_\_\_\_\_ Correctly identifies basic anatomy for head, lumber, and knee.

### Filming and Image Manipulation

- 1 2 3 \_\_\_\_\_ Demonstrates proper image labeling and filming.
- 1 2 3 \_\_\_\_\_ Correctly records, archives, and processes images.

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

\_\_\_\_\_  
Student

\_\_\_\_\_  
Date

\_\_\_\_\_  
MR Technologist

## MRI Competency Form B

List four hazards/risks associated with MRI:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

What is meant by a “pulse sequence”?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List three different types of coils used in this MR department:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Identify the three scan planes:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Student \_\_\_\_\_ MR Technologist \_\_\_\_\_

Date \_\_\_\_\_

**Mammography Rotation Checklist**

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

**Please use this checklist to orientate the student to the mammography environment.**

Activity	Performed	Initial & Date
<b>Department Information</b>		
Identify department location		
Introduction to staff		
Explain patient scheduling and registration		
Discuss requisition form		
Locate patient dressing area		
Discuss patient history form		
Review patient prep		
Explain patient identification methods		
<b>Equipment</b>		
Discuss room readiness		
Identify components of the equipment		
Locate important supplies (linens, supplies, etc.)		
Discuss skin markers		
Locate mammography units		
Demonstrate hand and foot controls		
Perform tube movements		
Demonstrate how to change the IR		
Discuss standard precautions used in mammography		
Review technologist control area		
Discuss control panel functions		
Explain patient log and processing		
<b>Image Processing</b>		
Demonstrate proper image recording and / or processing procedures		
Review image labeling and windowing (if applicable)		
Locate radiologist reading area		
<b>Positioning Techniques</b>		
Review examination protocols		
Explain patient positioning for CC and MLO		
Identify basic anatomy for CC and MLO		
Review mammography clinical objectives and competency forms		

## Mammography Positioning Competency

Poor = 1      Average = 2      Excellent = 3      Not Applicable = NA  
By the end of the one-week Mammography rotation the student will be able to:

### CC – Craniocaudal

- 1 2 3 \_\_\_\_\_ Determine proper IR (film) size.
- 1 2 3 \_\_\_\_\_ Stand on medial side of the breast to be imaged.
- 1 2 3 \_\_\_\_\_ Elevate inframammary fold to its maximum height, adjust height of IR accordingly.
- 1 2 3 \_\_\_\_\_ Slightly rotate patient's head away from side being imaged.
- 1 2 3 \_\_\_\_\_ Using both hands, gently pull breast onto IR, never release the breast.
- 1 2 3 \_\_\_\_\_ Center breast over photocell, with nipple in profile (if possible).
- 1 2 3 \_\_\_\_\_ With other hand, drape opposite breast over the corner of IR.
- 1 2 3 \_\_\_\_\_ Make sure shoulder is relaxed and ensures patient does not pull away.
- 1 2 3 \_\_\_\_\_ Apply appropriate compression.
- 1 2 3 \_\_\_\_\_ Move photocell to appropriate position.
- 1 2 3 \_\_\_\_\_ Effectively communicate breathing / positioning instructions.
- 1 2 3 \_\_\_\_\_ Identify anatomy demonstrated on the CC image.
- 1 2 3 \_\_\_\_\_ Critique overall image quality.

### MLO - Mediolateral Oblique

- 1 2 3 \_\_\_\_\_ Determine proper IR (film) size.
- 1 2 3 \_\_\_\_\_ Determine degree of obliquity and rotate IR accordingly (parallel to pectoral muscle).
- 1 2 3 \_\_\_\_\_ Rotate C-arm so that long edge of IR is parallel to pectoral muscle.
- 1 2 3 \_\_\_\_\_ Adjust tray height to a few inches below humeral head.
- 1 2 3 \_\_\_\_\_ Lift arm up and over corner of IR, place corner of IR in axilla.
- 1 2 3 \_\_\_\_\_ Lift breast UP and OUT opening up the IMF.

- 1 2 3 \_\_\_\_\_ Apply appropriate compression.
- 1 2 3 \_\_\_\_\_ Move photocell to appropriate position.
- 1 2 3 \_\_\_\_\_ Effectively communicate breathing / positioning instructions.
- 1 2 3 \_\_\_\_\_ Identify anatomy demonstrated on the MLO image.
- 1 2 3 \_\_\_\_\_ Critique overall image quality

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

**Technologist Interview Questions**

- 1. Why is it important to know if a patient has implants?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  
- 2. What does this facility do differently for a patient with implants?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  
- 3. Describe the different skin markers that are used and what they are for:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. What is the average kVp range for the CC and MLO positions?

CC \_\_\_\_\_

MLO \_\_\_\_\_

5. What additional views can be performed to get the nipple in profile if it is not visualized on the CC and MLO?

---

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Student: \_\_\_\_\_  
(Date)

Technologist: \_\_\_\_\_  
(Date)

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