Radiologic Technology Program

Student Handbook

2023 -- 2025

(Revised June 2023)

Program Accredited by:
Joint Review Committee on Education in Radiologic Technology

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Radiologic Technology Program Advisory Committee

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(All handbook information is subject to change with proper notification)

PROGRAM PURPOSE

The purpose of the Florida SouthWestern State College Radiologic Technology Program is to provide a nationally accredited, high-quality, radiologic technology learning experience.

PROGRAM MISSION

Recognizing the worth and dignity of the individual, and community's need for educated radiographers, the Program's mission is to strive for excellence through innovation and continuous improvement as it provides:

- Post-secondary career-oriented courses which provide students with marketable skills and expertise in Radiologic Technology.
- Courses transferable for continuation of undergraduate studies.
- Courses which enable students to enrich their lives socially, culturally, and intellectually.
- Counseling to assist individuals toward continuation of undergraduate studies, or job placement.
- Leadership as a medical imaging educational resource in serving the diverse and developing needs of the community of interest.

PROGRAM GOALS

- Students will be able to perform as an entry-level radiographer.
- Students will demonstrate critical thinking and problem-solving skills.
- Students will effectively communicate with patients and staff.
- Students will understand the value of professional development and life-long learning.

PROGRAM EFFECTIVENESS GOALS

- Graduates will pass the national certifying examination.
- Graduates will find employment in the field.
- Graduates will indicate overall satisfaction with the program.
- Students starting the program will complete the program.
- Employers will indicate satisfaction with graduates.
- Graduates will be clinically competent.

PROGRAM OBJECTIVES

Following successful completion of the program, the graduate will be able to:

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

Clinical Education

The philosophy of education practiced within the Radiologic Technology Program is to be a comprehensive competency-based program. This philosophy states that we learn best those concepts that we can experience. Therefore, throughout the curriculum of the program, clinical experience is correlated with didactic learning in an organized fashion called the **Clinical Education Plan**. Under this plan each student will accomplish approximately 1800 hours of clinical experience in the real medical world at affiliating hospitals and out-patient imaging centers. Students will be involved in all phases of daily operations of a medical radiology department. Each student will be creating medical images on hundreds of patients during the extent of the program. This practice is designed to allow the full development of cognitive, affective, and psychomotor learning in the art and science of medical radiographic production. The **Clinical Education Plan** is explained in the next section of this handbook.

FLORIDA SOUTHWESTERN STATE COLLEGE
RADIOLOGIC TECHNOLOGY PROGRAM
CLINICAL EDUCATION PLAN

Course Identification

A. RTE:	1503L	1804	1814	1824	2834	2844
B. Semester:	F-1	Sp-1	Sm-C	F-2	Sp-2	Sm-A
C. Credit Hours.:	2	3	3	3	3	2

Program Representatives

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- Coleen Kubetschek, Clinical Coordinator, (239) 489-9122
- Jason Ballard, Faculty, (239) 985-8318
- Dave Ingram, Fawcett Memorial Hospital, Port Charlotte, (941) 624-8778
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- Melanie Ingram, Lee Memorial Hospital, Ft Myers, (239) 343-2528/ department:343-2533
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- Matt Morris, Physician's Regional Medical Center, Naples, (239) 304-4866
- Lindsay Dahlgran, Lehigh Regional Medical Center, Lehigh Acres, (239) 368-4714
- TBD, ProScan NCH Imaging - Medical Blvd., Naples (239) 624-6645
- TBD ProScan NCH Imaging – 9th St., Naples, (239) 624-4060
- Ashley Partridge, American Imaging of SW Florida, Port Charlotte, (941) 235-8762
- Phoenix Schofield, Lee Health Imaging – HealthPark Commons, Fort Myers, (239) 343-7246
- Kevin Herrera, Lee Health Imaging – Surfside, Cape Coral, (239) 542-7530, ext. 2
- Christina Johnson, Lee Health Imaging – Sanctuary, Fort Myers, (239) 343-9455, ext. 3

Clinical Description

Affiliation agreements with various hospitals and out-patient imaging centers enable Florida SouthWestern State College Radiologic Technology students to gain valuable clinical experience in departments of radiology. Each student has the opportunity to demonstrate the skills learned in the classroom and laboratory in a real clinical setting. In this area each student is assigned to various department rotations. The student at first works closely with a registered radiologic technologist. As proficiency and speed increase, the student performs examinations in an indirectly supervised capacity.

Clinical experience involves the student in the handling and the care of patients and various radiographic equipment. The student learns to manipulate exposure factors in all clinical situations under many different conditions. Each student gains significant experience in: routine and special positioning methods, surgical radiographic procedures, manipulation of radiographic images, and maintaining radiographic records.

AT NO TIME WILL THE COMBINATION OF REQUIRED CLINICAL AND CLASSROOM HOURS EXCEED 40 HOURS PER WEEK.

Clinical Objectives

The student will:

1. Perform or assist with each radiographic procedure assigned to his/her room. Level of supervision: by direct supervision of a registered radiologic technologist.

2. Perform independently with indirect supervision in areas of completed category competency evaluations.

3. Demonstrate:
   a. Proper evaluation of each requisition
   b. Physical facilities readiness
   c. Professional interpersonal relationships
   d. Competent patient positioning skills
   e. Skillful equipment manipulations
   f. Evidence of proper radiation protection

4. Evaluate radiographic images for:
   a. Anatomical parts/terminology
   b. Proper alignment
   c. Radiographic technique
   d. Image identification
   e. Evidence of radiation protection

5. Be evaluated in the following clinical category competency areas:

NOTE: Students will be required to show competency in 55 radiographic procedures and 10 patient-care activities. Up to nine radiological procedures may be simulated (see note below).

FALL SEMESTER, 1ST YEAR, RTE 1503L
Aug. - Dec., 16 hours/week

Competency Evaluations 2 procudures

- Radiographic Control Panel and Accessories
- Digital Equipment Manipulation/Identification, R/F Room
- Patient Care and Safety
- Chest: PA and Lateral only♦** **(prerequisites: Rad Control Panel, Equip Manip, and Patient Care)**
- Abdomen: Supine only♦** **(prerequisites: Rad Control Panel, Equip Manip, and Patient Care)**

SPRING SEMESTER, 1ST YEAR, RTE 1804
January - April, 24 hours/week

Competency Evaluations - 18 procedures

- **CHEST CATEGORY –** 1 procedure
  Chest: Stretcher or Wheelchair♦**

- **ABDOMEN CATEGORY –** 1 procedure
  Abdomen: Acute Abdominal Series or Supine & Upright Abdomen♦

- **UPPER EXTREMITY CATEGORY**, 9 procedures /1 each

Thumb/Fingers♦	Elbow♦**
Hand♦**	Humerus♦
Wrist♦**	Shoulder♦**
Forearm♦**	Scapula or AC Joints
Clavicle♦	

- **LOWER EXTREMITY CATEGORY**, 7 procedures / 1 each

Foot♦**	Knee♦**	Tibia/Fibula♦
Ankle♦**	Patella	
Calcaneus	Femur♦	

SUMMER C SEMESTER 1st YEAR, RTE 1814
May - August, 24 hours/week

Competency Evaluations: 10 procedures

- **GI CATEGORY** – 4 procedures / A minimum of two of the following MUST be performed on patients.
  Esophogram/Barium Swallow
  UGI
  Small Bowel Series
  Barium Enema

- **ONE ARRT ELECTIVE EXAMINATION:** 1 procedure from the following:
  Decubitus Chest, Decubitus Abdomen, Toes, AC Joints/Scapula (whichever was not done previously)
  Soft Tissue Neck, SI Joints, ERCP, IVU, Cystography, VCUG

- **MOBILE CHEST --** 1 procedure (Non OR) ♦**
- **MOBILE ABDOMEN** – 1 procedure (Non OR) ♦**
- **Hip with axiolateral** (cross-table lateral) ♦
- **Pelvis♦**
- **Hip with Frog-leg♦****
- **C-ARM EQUIPMENT MANIPULATION**

FALL SEMESTER, 2ND YEAR, RTE 1824
Aug. – Dec., 24 hours/week

Competency Evaluations: 11 Procedures

- **SPINE CATEGORY**, 4 procedures / 1 each
  C Spine♦**
  T Spine♦
  L Spine♦**
  Sacrum/Coccyx

- **BONY THORAX CATEGORY**, 2 procedures / 1 each
  Ribs♦
  Sternum

- **TRAUMA SHOULDER/HUMERUS** (To include: Scapular Y, Transthoracic or Axillary), 1 procedure♦**
- **SURGICAL C-ARM PROCEDURE: requiring manipulation around a sterile field,** 1 procedure♦
- **GERIATRIC EXAMS: At least 65 years old and physically or cognitively impaired as a result of aging,** 3 procedures
  Routine (2-view) Chest ♦**
  Upper or Lower Extremity ♦**
  Hip or Spine

SPRING SEMESTER, 2ND YEAR, 24 hours/week, RTE 2834

Competency Evaluations: 11 Procedures

- **HEAD WORK CATEGORY, 6** procedures, minimum of 1 exam must be performed on a patient

Skull	Sinuses
Facial Bones	Mandible or TMJs
Nasal Bones	Orbits to include Rhese Method

- **PEDIATRIC (2-view) CHEST**, 1 procedure (child, 6 years old or younger) ♦
- **CROSS-TABLE LATERAL SPINE** 1 procedure (C, T or L spine) ♦

- **C-ARM EXAMINATION** with a minimum of two views 1 procedure ♦
- **TRAUMA UPPER EXTREMITY** (non-shoulder) ♦**
- **TRAUMA LOWER EXTREMITY** (non-hip) ♦**

SUMMER SEMESTER, 2ND YEAR, "A" term, 24 hours/week, RTE 2844

Competency Evaluations: 3 procedures

- **SPECIAL PROCEDURES CATEGORY**: **1** procedure
  Myelography, Arthrography, or Hysterosalpingography
- **ONE ARRT ELECTIVE EXAMINATION:** 1 procedure from the following:
  Decubitus Chest, Decubitus Abdomen, Toes, SC Joints, AC Joints/Scapula, (whichever was not done previously), Soft Tissue Neck, Scoliosis Series, SI Joints, ERCP, IVU, Cystography, VCUG, Pediatric (6 years or under) exams: Abdomen, Upper extremity, Lower extremity or mobile exam
- **MOBILE UPPER OR LOWER EXTREMITY** 1 procedure ♦**

Elective Rotations: (**3** days maximum)

a. Ultrasound
b. Magnetic Resonance Imaging
c. Nuclear Medicine
d. Special Procedures
e. Computed Tomography

♦ ARRT Mandated Exams

** These exams cannot be simulated.

NOTE: "Trauma" requires modification in positioning due to injury with monitoring of the patient's condition.

Method of Evaluation

A. Category Competency Evaluation Forms. (See forms in Appendix A)

A primary student goal for each grading period is to be certified competent* to perform independently in the appropriate competency category for that semester. After observation and/or practice of examinations, the student may request the clinical instructor or approved evaluator to evaluate his/her performance on the appropriate Competency Form. The student may not perform an exam with indirect supervision, (see Direct/Indirect Supervision Policy) until **BOTH UPPER AND LOWER** parts of the evaluation form have been completed and properly signed.

*In order to ensure the safety of our patients, competencies may be revoked at any point in time if a student's clinical ability is in question. This would require an addition attempt at that competency category and grading would follow the policy guidelines. If the competency grade has been submitted in previous semesters, the student would no longer work under indirect supervision for that category and a specified number of successful attempts of this exam would be required to restore the status of "indirect supervision".

Once a competency procedure has begun, a student may not choose to terminate the evaluation. The evaluation is only terminated by following improper procedure or at the discretion of the evaluator.

Categories assigned should be completed during the grading period to pass the course and progress in the program.

Early competency evaluations: Students may request evaluation a competency in advance of the scheduled semester grading period to take advantage of exam frequency, etc. An early competency can be done by the student who has successfully completed both lecture and lab components on that examination. Grades earned will remain on file until the semester due. **This is strongly recommended for the headwork competencies.**

B. Personal Performance Evaluations (See forms in Appendix A)

Weekly, the staff radiographers evaluate each student's overall clinical performance on a form called the **Student Performance Evaluation**. This is to give the student relevant feedback on how she/he is perceived to be performing by others in the department. The student is responsible to initiate the completion of this performance evaluation in a timely manner. Failure to do so will result in a one-point demerit. An electronic **Mid-Course Personal Development Assessment** form also will be used as a service to the student in providing feedback. These evaluations do not have a letter grade assigned to them. At the end of the semester, the Clinical Coordinator completes an electronic **Final Personal Development Assessment (PDA)** which is reviewed by the student. This assessment will affect the final course grade in conjunction with skill performance grades earned on competencies, demerits, skills evaluations and on-campus laboratory grade.

A **Demerit** form is used to document clinical performance not in keeping with the goals of the program. This form documents those instances where a student's behavior is in need of major changes to be in line with that of a professional Radiologic Technologist. Please refer to the form in appendix C and to the next section on clinical grading to understand its use in the program.

CLINICAL GRADING PROCESS

Clinical Grading Scale

Competency Grading

A minimum grade of 85% must be attained on the first attempt to show competency on a particular examination. An "Unsatisfactory" of an asterisked item will result in termination of the exam. If the first attempt is not successful, the exam may be challenged a second time. If the second attempt is successful, a grade of 85% will then be recorded for that examination. A third attempt may be challenged following a successful lab competency. If successful, a grade of 33% will be recorded. If a student does not pass the third attempt a grade of 0 will be recorded, however the student must still demonstrate competency for that exam.

FINAL CLINICAL GRADE COMPUTATION

RTE 1503L, 1804, and 1814 consist of two components: clinical practicum (**80%**) and lab practicum (**20%**). RTE 1824, 2834, and 2844 will not have the lab practicum portion.

The final letter grade for each clinical education course is determined by the following steps in order and weighted according to course numbering:

To receive an "A" grade, the student must:

1) Complete all required competency evaluations with an average of 96 to 100%.
2) Complete all required clinical time by the end of the grading period of the current semester.
3) Receive no "Needs Improvement" assessment in any category and no "Unacceptable" in any category on the Final Personal Development Assessment.
4) Did not receive enough Demerits to lower the grade below a 96%.

To receive a "B" grade, the student must:

1) Complete all required competency evaluations with an average of 91 to 95%.
2) Complete all required clinical time by the end of the grading period of the current semester.
3) Received no more than **one** Needs Improvement assessment in any category & No Unacceptable assessment in any category on the Final Personal Development Assessment.
4) Did not receive enough Demerits to lower the grade below a 91%.

To receive a "C" grade, the student must:

1) Complete all required competency evaluations with an average of 85 to 90%.
2) Complete all required clinical time by the end of the grading period of the current semester.
3) Received no more than **two** Needs Improvement assessments in any category & No Unacceptable assessment in any category on the Final Personal Development Assessment.
4) Did not receive enough Demerits to lower the grade below an 85%.

Receiving a Group I Incident Report any time during the program may result in dismissal. All such cases will be reviewed by a Disciplinary Committee and will be subject to the College's Due Process Policy.

LAB PRACTICUM

Each student is expected to be present for the entire assigned lab session. Lab is divided into three components: attendance, lab participation, and skill evaluations. Grading for the lab practicum will be determined by the following:

1) <u>Attendance</u>

Each student will achieve 2 points for each lab session.

a. 1 point will be deducted for tardiness of any duration. One minute past the start time for lab is considered tardy.
b. 1 point will be deducted for leaving early. Leaving early one minute or more is considered leaving early.
c. If the lab is missed, a 0 will be recorded for that day.

2) <u>Lab Participation</u>

Each student can achieve one point for coming prepared <u>and</u> engaging in active participation for each lab session.

3) <u>Skill Evaluation</u>

At the end of the semester, each student's attainment of knowledge and ability may be evaluated utilizing the Skill Evaluation grade sheet. This evaluation may be performed at the end of RTE 1503L, 1804, and 1814. Each student will be scheduled by the Clinical Coordinator.

NOTE: If a Needs Improvement assessment reduces the clinical grade, the grade will be to the upper range of the next lower letter grade. (e.g. one marginal assessment would reduce a 98% clinical grade to 95%, the upper range of a B grade. Two marginals would reduce a 98% clinical grade to a 90%, the upper range of a C grade. Demerits are then subtracted after the marginal assessments are considered in the grade.

ATTENDANCE POLICY ***<u>(any changes, additions, or deletions to a student's schedule must be Program approved)</u>*** Punctual attendance during all clinical education courses is mandatory for continued progression in the program. Specific shift start times will vary according to hospital or outpatient clinical assignment. The Clinical Coordinator determines shift hours. The Program strongly recommends that each student be at his/her station and "ready-to-go" five minutes before his/her scheduled start time. A tardy is documented at one minute past the scheduled start time and a left early is defined as leaving one minute or more prior to the end of the scheduled shift. More than two tardies or leave earlies in any one semester earns demerits. Two absences (excluding jury duty, bereavement, and military duty) are allowed each full semester without academic penalty. The third absence is an academic demerit. The fourth absence, and so on, receives respective demerits. (See Demerit Form)

A "tardy" is defined when a student clocks in between 1 minute and 4 hours after their scheduled start time. If a student is tardy 30 minutes or less, they may make up the missed time at the end of that day.

A "leave early" is defined when a student clocks out between 1 minute and 4 hours before the end of their scheduled shift.

Any time missed greater than 4 hours constitutes an "absence". The student only makes up the time missed.

The College and program have predetermined semester breaks. Students are expected to plan VACATIONS, FAMILY REUNIONS, MARRIAGES, ELECTIVE SURGERY, etc., during these semester breaks and not during the semester time periods.

Any absence the clinical day before or after a scheduled holiday or college break will result in one additional demerit for each day missed.

All clinical time must be completed before a grade will have been earned for each course. Students **MUST arrange make-up time with the Clinical Coordinator** and with the approval of the appropriate clinical instructor at the assigned clinical site. Any rescheduled make-up day is treated as a scheduled day in regards to tardiness, absenteeism, etc. **Students may make up time on days approved by the clinical instructor and clinical coordinator.**

The student must personally notify the Clinical Coordinator **and** Clinical Instructor 30-minutes before the scheduled clinical start time. If the CI is not available or has not yet arrived at the hospital when the student calls, a message may be given to a department staff member. A phone message or e-mail to the Clinical

Coordinator is also required. If the student fails to inform both the CI and Clinical Coordinator in an appropriate manner, he/she will receive 1 demerit for each occurrence.

ABSENCE REPORTS
An Absence Report must be completed following any absence from the clinical setting. Any make up time must be approved by both the Clinical Instructor and Clinical Coordinator **prior to** the time being done.

HURRICANE / DISASTER POLICY
In the event of a hurricane OR natural disaster, students should listen to the local news media for campus closings. If in question, call Florida SouthWestern State College, Lee Campus Public Safety at (239) 489-9203, Collier Campus Public Safety at (239) 732-3712, or Charlotte Campus Public Safety at (941) 637-5608. If a particular Florida SouthWestern State College campus is closed, NO STUDENT SHOULD BE ON THAT CAMPUS. If any campus is closed, NO STUDENT SHOULD BE AT ANY CLINICAL SITE. UNDER NO CIRCUMSTANCES SHOULD A STUDENT USE THIS TIME TO MAKE-UP HOURS PREVIOULSY MISSED. When a closure is ordered or when contacted by the Program or Clinical Coordinator, students may be required to leave a clinical site before completing his/her daily rotation. Time is not made-up when missed due to hurricane / disaster closures.

JURY DUTY
If a student is called for jury duty, the time missed is considered excused and will not need to be made up. A court appearance mandated by legal summons will be considered excused. All other court time will be treated as a regular absence.

MILITARY DUTY
All military duty is considered an excused absence.

BEREAVEMENT
Upon the death of an immediate family member (father, mother, brother, sister, mother-in-law, father-in-law, grandfather, & grandmother) a student is granted up to 3 clinical days of leave time. Bereavement time is excused and does not need to be made up.

CLINICAL ASSIGNMENT ROTATIONS
A plan of clinical assignments will be such that the student will be experienced in all facets of the modern radiology department. This schedule allows the student to apply didactic learning with actual practice in the clinical setting. Students will rotate through radiographic assignments during day shifts. However, following the second semester, assignments are made to other affiliate hospitals. Other rotations may include: surgery, mobile imaging, CT, MRI, sonography, nuclear medicine, and special procedures.

The Clinical Coordinator makes all room assignments. Students cannot change their scheduled rotations.

Schedule of assigned areas:

Fall-1 (Wednesdays and Fridays) - Fall Semester at Hospital #1
- Radiographic Rooms
- Portables

Spring-1 (M,W,&F)	- Spring Semester Continued at Hospital #1 -Radiographic Rooms -Surgery -Portables - Outpatient Clinic
Summer-C (M,W,&F)	Summer Semester at Hospital #2 -Radiographic Rooms -Surgery -Portables -Outpatient Clinic
Fall-2(M, T & Th)	Fall Semester at Continued at Hospital #2 -Radiographic Rooms -Surgery -Portables -Outpatient Clinic -One week CT rotation
Spring-2(T,W,& Th)	Spring Semester at Hospital #3 -Radiographic Rooms - Surgery -Portables - Outpatient Clinic - One week Special Procedures rotation
Summer-A(M, T & Th)	Summer A Semester at Hospital #3 -Radiographic Rooms - Surgery -Portables
	-Three **days total** of elective rotation in any of the following modalities in any combination: MRI, Sonography, Nuclear Medicine, CT, and/or Special Procedures

CLINICAL ASSIGNMENT AREAS

Students will be assigned to specific areas by the Clinical Coordinator. They will change assigned areas only when asked to do so by their Clinical Instructor. **Changes in assignments are to be educationally valid.**

HOSPITAL ORIENTATION

All hospital orientations must be completed before the student will be allowed in the clinical setting. Hospital orientation material will be provided by the clinical site.

HOSPITAL ROTATION ASSIGNMENTS

Each student may be assigned to at least three different hospitals during the length of the program. These hospital rotations help insure that each graduate is readily adaptable to new work environments and has gained comprehensive experience in all areas of radiology.

INJECTION OF CONTRAST MEDIA, RADIOPHARMACEUTICALS & MEDICATIONS

It is program policy that students **DO NOT, UNDER ANY CIRCUMSTANCE**, inject or otherwise "push" contrast media, radiopharmaceuticals, or any other type of medication as part of their clinical education, i.e., intravenous & intramuscular injections. Students may introduce barium or other contrast media for the purpose of a gastrointestinal or biliary study.

TRANSPORTATION: A student provides his/her own transportation to and from all clinical assignments.

REPEATED RADIOGRAPHS

A student may do the FIRST RADIOGRAPH REPEAT if a registered technologist is in DIRECT SUPERVISION (see definition below). If necessary, the technologist performs the SECOND RADIOGRAPH REPEAT and allows the student to observe the corrections. **A STUDENT <u>NEVER</u> REPEATS A RADIOGRAPH WITHOUT DIRECT SUPERVISION OF A REGISTERED TECHNOLOGIST.** Each offense is a five-percent decrease in the semester clinical grade.

DIRECT AND INDIRECT SUPERVISION

Until a competency evaluation is successfully completed, a student must have direct supervision of a registered technologist. This means that the technologist is present in the radiographic room with the student during the examination. After successful completion of the competency and both upper and lower parts of the evaluation form are properly completed and signed, the student may perform those specific examinations with indirect supervision. Indirect supervision is defined as: The technologist is READILY AVAILABLE and in HAILING-DISTANCE, but not necessarily in the radiographic room at the time of the examination.

CPR CERTIFICATION

CPR certification (American Heart Association – Healthcare Provider/Category C) is required before the start of the program. Students may not report to clinic without a valid card. Certification must be kept current while in the program.

FLORIDA SOUTHWESTERN STATE COLLEGE
RADIOLOGIC TECHNOLOGY PROGRAM
DRESS CODE AND PERSONAL HYGIENE POLICY

The following statements are designed for student and patient safety while maintaining standards of professionalism in the radiology departments of the clinical education centers of the Florida SouthWestern State College Radiologic Technology Program. The Clinical Coordinator will determine what clothing does not meet dress code.

1. All uniforms must be purchased at the FSW Bookstore on the Lee County campus. The uniform tops and lab coats must display the Radiologic Technology program logo. Hospital or FSW nametag and radiation monitor must be visible at all times during clinical assignment.

2. Uniform pants are black.

3. Uniform tops are purple. They must be clean and be embroidered with program information. If an under garment is to be worn, it must be black and meet with program standards.

4. Hospital-issued surgical scrubs are worn in the department only if the student is assigned to surgery or special exams that require surgical clothing. These surgical scrubs are not to be taken out of the hospital.

5. Clean, black footwear (shoes/sneakers) and socks must be worn at all times. No open-toe or open-back shoes and no colored sneakers allowed. No clogs!

6. **Tattoos that will show outside of the school uniform must be approved by the Clinical Coordinator**

7. Simple make-up and jewelry (i.e. wristwatch, ring, necklace, and earrings) allowed. Earrings must not extend beyond the earlobes. Only one pair of earrings permitted (one in each ear). No other visible "rings or studs" are acceptable, (i.e. nose ring, tongue studs, etc.). Only one necklace permitted and any attachments are not to exceed ½ inch in height/width.

8. Fingernails will be short and clean. Clean is also defined as NO POLISH. ANY type of nail polish is PROHIBITED. No artificial or acrylic nails are allowed.

9. Excessive amounts of perfume or cologne is prohibited.

10. Hair should be clean, and neat. If longer than shoulder length, hair should be tied back to avoid contact with the patient, etc. The hairstyle should in no way obscure the student's vision or ability to provide patient care.

11. Sideburns and beard must be neat, clean and trimmed close to the face.

12. Daily bathing and personal hygiene are required.

13. Personal cell phones must on mute and kept concealed at all times. Students may not take photographs at the clinical unless approved by the Clinical Instructor.

CRIMINAL BACKGROUND CHECK
Required for applicants who are accepted into the Radiologic Technology Program

Each applicant must provide the program with a criminal background check and drug screen through CastleBranch. These must be completed prior to acceptance into the program and a second background check and drug screen will be required prior to the beginning of the second year. This criminal background screening ensures consistency with the requirements of Chapter 435, Florida Statutes, by health care agencies with which Florida SouthWestern State College has clinical affiliation agreements.

If a student is arrested for a felony or misdemeanor while enrolled in the program, he or she is required to immediately report the arrest any subsequent legal proceedings to the Program Director. This report must include any official court documents and a written explanation of the circumstances concerning the incident. Failure to inform the Program Director in a timely manner may result in disciplinary action up to and including dismissal from the program.

Applicants with criminal records are forewarned that the Florida Department of Health, Bureau of Radiation Control, requires any applicant who has ever been convicted or found guilty of a felony, regardless of adjudication, to explain the circumstances. The same is true for other states with licensure statutes as well as the American Registry of Radiologic Technologists. These individuals will need to gain clearance from these agencies before they are allowed to take the national certification examinations and apply for a state license.

Criminal History Findings
Any applicant or enrolled student who has been found guilty of, regardless of adjudication, or entered a plea of nolo contendere, or guilty to, any offense under the provisions of Florida Statutes or under similar statutes of another jurisdiction may be disqualified from admission or continued enrollment in the Radiologic Technology Program.
Those offenses include:

- Murder
- Manslaughter
- Vehicular homicide
- Killing of an unborn child by injury to the mother
- Assault, if the victim of the offense was a minor
- Aggravated assault
- Battery, if the victim of the offense was a minor
- Aggravated battery
- Kidnapping
- False imprisonment
- Sexual battery
- Prohibited acts of persons in familial or custody authority
- Lewd and lascivious behavior
- Arson
- Theft, robbery, and related crimes, if the offense is a felony
- Fraudulent sale of controlled substances, only if the offense was a felony
- Incest
- Abuse or neglect of a disabled adult or elderly person

- Exploitation of disabled adult or elderly person
- Aggravated child abuse
- Child abuse
- Negligent treatment of children
- Sexual performance by a child
- Alcohol or drug offenses which were a felony, or if the offense involved a minor
- Offenses indicating unfitness to serve as a health care professional

Health Record / Ability to Meet Technical Standards

A completed medical health form and self assessment of Program Technical Standards must also be submitted prior to admission to clinical rotations. This health record will contain results from a physical examination and laboratory tests including immunization records. A TB test and flu shot will be required on a yearly basis.

Student drug screens, criminal history reports, and medical records, when submitted, will become the property of Florida SouthWestern State College, and **will not** be available for copying or for use to meet the requirements of outside employers or other agencies/persons.

Certain clinical sites require students to submit information concerning their Health Reports, drug screens, and background checks prior to attending their first day at their site.

Appeal Process

If a review of a criminal background check or a medical health report deems an applicant or student ineligible for admission or continuation in the Radiologic Technology Program, an appeal can be filed. The FSW appeals process will be followed.

HEALTH STANDARDS AND SERVICES

Program health standards for enrolled students.
Changes in a student's health that may affect the health and safety of other students, patients, or staff must be reported to the Program Director and Clinical Coordinator in a timely manner (Note: see Provisions for Pregnant Students). Students are expected not to attend clinical when in a contagious state of illness. (Time missed will be made up later.) After major illnesses or injury, a physician's statement of good health may be required to be on file with the Program Director before attending clinical courses.

Student Medical Insurance
Students are required to carry personal medical insurance at all times during the program.

Florida SouthWestern State College does not offer hospital facilities or a student infirmary. Should a health problem occur while in classes, the student will contact his or her personal physician. If the problem is severe, emergency medical services (911) may be called.

STUDENT LIABILITY AND ACCIDENT INSURANCE

As part of the lab fees, Florida SouthWestern State College Radiologic Technology students are covered by the college's accidental insurance policy while attending the clinical sites. This insurance does not cover travel to and from clinical sites and is limited in its coverage. Please refer to the specific insurance forms.

1. If student is injured during clinical time, the injury should be reported immediately to the Clinical Coordinator or Program Director and the student is to immediately see either the emergency physician or his/her own physician.

2. The Clinical Coordinator or program official will gather information and fill out the appropriate sections of the claim form. Student must sign the bottom of the claim form.

3. The claim form is then forwarded to the Dean of the School of Health Professions.

4. The Clinical Coordinator with notify the Florida SouthWestern State College Public Safety Department and an Incident Report will be completed regarding the claim.

5. It is the student's responsibility to submit the completed claim form to the insurance company.

FLORIDA SOUTHWESTERN STATE COLLEGE
SCHOOL OF HEALTH PROFESSIONS

RADIOLOGIC TECHNOLOGY HEALTH REPORT

This report needs to be completed and uploaded to CastleBranch.

NAME _____ ADDRESS _____

CITY _____ STATE _____ ZIP _____ PHONE NUMBER _____

E-MAIL _____

IN CASE OF EMERGENCY NOTIFY _____ PHONE _____

PROGRAM REQUIREMENTS

I have the ability to: (check each)
_____ Push and pull routinely
_____ Have full use of both hands and wrists
_____ Assist patient on and off exam table.
_____ Ability to lift 30 pounds routinely.
_____ Ability to squat.
_____ Ability to bend both knees.
_____ Work standing on feet 80% of the time.
_____ Ability to do above requirements while wearing lead protection.
_____ Visual acuity-adequately view radiographs including density, contrast, and sharpness distinctions
_____ Auditory ability and verbally communicate

Student Signature: **Date:**

Health Care Provider:
To the best of my ability from my examination and history taking on this student concur that the student can perform all the listed program requirements.

Healthcare Provider Signature: **Date:**

HEPATITIS B VACCINE

The **Hepatitis B vaccine** is readily available at your doctor's office or local health clinic. Three doses are generally required to complete the Hepatitis B vaccine series, although there is an accelerated two-dose series for adolescents.

Hepatitis B Refused _____ Date:_____
(student signature)

- First Injection - At any given time
- Second Injection - One month after the first dose
- Third Injection - Six months after the first dose

Hepatitis B Injections Received: ☐ Positive

#1 Date:_____ #2 Date:_____ #3 Date:_____ Titer Date: _____ ☐ Negative

IMMUNIZATIONS REQUIRED

Immunization	Date		Titer (Lab reports must be submitted)
Tetanus (within 10 years)			N/A
Pertussis (Whooping Cough)			N/A
MMR (Measles, Mumps and Rubella) (x2)	1_____ 2_____	OR	☐ Positive ☐ Negative *if negative immunity-MMR x2 required
VZV Varicella (x2)	1_____ 2_____	OR	☐ Positive ☐ Negative *if negative immunity- vaccine required (x 2)
PPD, TST, QuantiFERON TB Gold, or T SPOT Tuberculin Test			☐ Positive ☐ Negative *if positive, CXR and/or symptoms analysis required ***MUST BE DONE ANUALLY***
*Flu Vaccine			***MUST BE DONE ANNUALLY EVERY FALL***

*__Proof of flu vaccine will be required when applicable.__

****

TO THE HEALTHCARE PROVIDER:

This is to certify that I have examined _____ on _____ and have found
(patient's name) *(date)*
her/him to be in good physical, mental and emotional health, as described in the stated requirements, and free from communicable disease.

EXCEPTIONS - Please note below any physical, mental and emotional abnormalities, defects, or diseases which might in any way interfere with the student's attendance and progress in the School of Health Professions:

_____

_____

SIGNED _____
(Signature of M.D., D.O., A.R.N.P., P.A.)

Healthcare Provider Address: _____

_____

TO THE STUDENT:

I, _____, give Florida SouthWestern State College permission to share part or all of the information on this health evaluation with the clinical agency(ies) to which I will be assigned.

Signed:_____Date:_____
(Signature of Student)

FAIR PRACTICES

Grievance and Complaint Procedures

In the event a student has a grievance or complaint regarding academic, non-academic, or clinical issues, the student will follow the college's "Academic Grievance Procedure". This procedure can be found on the following link:

http://catalog.fsw.edu/content.php?catoid=9&navoid=500&hl=academic+grievance+&returnto=search#academic-grievance-procedure

If a student has a concern that the program is in non-compliance with the Joint Review Committee on Education in Radiologic Technology (JRCERT) Standards, the student should follow the following procedure:

1) The student should inform the Program Director of the allegation(s) in writing within two weeks of the incident or complaint.
2) The Program Director will respond within two weeks.
3) All allegations and their resolution will be kept on file with the program administration.

Radiation Monitoring Practices

The program requires that all students wear a radiation-monitoring device (dosimeter) in accordance with federal radiation standards. These monitors should be kept in a designated area at the clinical site when not in use and should be worn at collar-level and outside the lead apron whenever the student is at the clinical site. Failure to properly wear and/or store the monitor is cause to receive a demerit (see Demerit Form, appendix A). The Program Director serves as the Radiation Safety Officer (RSO) for the program. He/she reviews the monitoring reports each month to assure that each student is within safe exposure guidelines in accordance with the concept of ALARA (As Low As Reasonably Achievable). Students that receive excessive radiation exposures are counseled on their radiation protection practices by the RSO. Those with exposures within a one-month period of 50 millirem SDE, or higher, will receive written notification to be signed and returned to the RSO. An attempt is made to determine the cause of the exposure and methods of reducing the exposure in the future are discussed and agreed upon.

Radiation exposure reports, with personal information (social security number and date of birth) eliminated, are given to the students to review. These reports are also available from the monitoring company via the internet.

Radiation Protection Rules

Following an introduction to the radiation protection policies and procedures of the program, the student will adhere to the following rules:

1. It is the responsibility of the student to insure the protection of him-/herself, the patient, and the general public from the harmful effects of ionizing radiation to the best of his or her ability.
2. The student should always follow the concepts of ALARA.
3. The student will not hold patients or image receptors during an exposure.

4. The student will always wear a dosimeter at collar level while in the clinical setting and during fluoroscopic or mobile exams, the student will always wear the dosimeter outside the lead apron.
6. The student will be responsible for the proper storage of his or her dosimeter while away from the clinical site.
7. The student will stand a minimum of six feet from the patient during mobile radiographic examinations and wear appropriate lead apparel.
8. The student will use lead shielding on all patients regardless of age unless it will negatively affect the quality of the radiographic images.
9. The student will always use proper collimation.
10. The student will determine the pregnancy status of female patients when appropriate.
11. The student will understand and adhere to the radiation safety rules at the individual clinical site.

MRI Safety and Screening Process

It is the policy of the program that prior to the lecture and completion of the screening form, students are not allowed to enter Controlled Access Area - Zone III or IV of the MRI suite for any reason.

Before the student begins their MRI rotation, they will be given the MRI Screening Assessment Form which they will complete and review with a registered MRI technologist at their clinical site. This completed form must be given to the Clinical Coordinator before the student may enter the MRI suite.

Provisions for Pregnant Students
The provisions made for pregnant students are as follows:

a. A student who is pregnant, or suspects she is pregnant, has the option of whether or not to declare her pregnancy to program officials. If she chooses to inform the officials of her pregnancy, it must be done in writing and indicate the expected date of delivery, and she has the option of un-declaring her pregnancy at any time. This withdrawal of declaration must be done in writing and given to the Program Director. Notification of the change in her health status facilitates the program's policies concerning pregnant students (see the Pregnancy Counseling Sheet). If she chooses not to inform the program officials, she will be treated no differently than other students.

b. Following the student's declaration of pregnancy, the RSO will review the Nuclear Regulatory Commission Regulatory Guide 8.13 with her. The RSO will also review the Pregnancy Counseling Sheet with the student and she will sign the document indicating that she understands the concepts of the policy.

c. The Program Director will review the student's options concerning her continuation within the program. These options include: (a) continuation of the program without interruption, (b) withdrawal from the program and re-entering it at the beginning of the next semester in which her unfinished courses are offered, and (c) receiving a limited leave of absence. If a limited leave of absence is requested, it must be in writing **and** approved by the faculty.

FLORIDA SOUTHWESTERN STATE COLLEGE
RADIOLOGIC TECHNOLOGY PROGRAM

PREGNANCY COUNSELING SHEET

The purpose of this form is to document that the student named below and the Radiologic Technology Program Director have had a counseling session in regards to specific program policies related to student pregnancy.

Protection concepts reviewed:

1. During the gestation period, the dose equivalent limit for the fetus is 0.5 rem, or 5 mSv, and 0.05 rem, or 0.5 mSv/month.

2. A second radiation dosimeter will be ordered immediately and is to be worn at the waist level and under any radiation protection device (e.g.apron).

3. A review of the cardinal principles of radiation protection including time, distance and shielding was performed to minimize the fetal dose.

4. Clinical competencies, objectives, and attendance policy will remain unchanged.

5. Absences due to pregnancy will be made up according to policies governing absences.

6. The student has the option of withdrawing from the program and re-entering at the beginning of the next semester in which her unfinished courses are offered. Re-entering is on a clinical space available basis.

7. The student has the option, in consultation with program faculty, to take a limited leave of absence from the program. This leave may result in a postponed graduation date.

Expected Due Date: _____

I, _____, have discussed the above Program Pregnancy Counseling Sheet with my Program Director and understand the Pregnancy Policy of the Radiologic Technology Program.

_____ _____
Student Signature Date

I, _____, have decided to revoke my declaration of pregnancy.

_____ _____
Student Signature Date

Discrimination and Harassment Policy

Please refer to the college's policy below:

https://www.fsw.edu/viewdocs/doc/299209
(Florida SouthWestern State College Board of Trustees Policy 6Hx6:2.03)

Infectious Disease Policy

EXPOSURE TO INFECTIOUS DISEASES PLAN

PURPOSE: The Radiologic Technology program, within the School of Health Professions at Florida SouthWestern State College, recognizes that the students who participate in the programs offered will have direct contact with patients in a health care setting. It is possible that some of the patients cared for will have an infectious disease, as defined by the Center for Disease Control (CDC). It is further possible that a student might become exposed to an infectious disease. It is the purpose of this policy to outline the process that must be followed to assure the health and safety of the students who progress through the Radiologic Technology program.

Definition:
Exposure: The process of contact with a blood borne or airborne pathogen that is capable of causing an infectious disease, as defined by the CDC. This contact can occur from, but is not limited to, a needle stick, spray of blood onto exposed mucous membranes, or breathing within a confined space while exposed to a patient who has an infectious respiratory ailment.

POLICY:

- Students are to be taught universal / standard precautions during the first semester of the program.
- Students are to use the appropriate precautions while in clinical settings. If the student is unsure of what precautions are necessary, he/she is to check with his/her clinical instructor or a staff technologist prior to initiating contact with the patient.
- Any student who is either exposed, or believes that he/she has been exposed, needs to follow the procedure as defined below.

EXPOSURE PROTOCOL:

1) The Clinical Coordinator is to be notified immediately.
2) The student will be directed to be seen in the Emergency Department or contact his/her personal physician immediately.
3) Insurance
    a. The student will obtain the proper insurance paperwork from the Clinical Coordinator
    b. The student will have the Emergency Department Physician or personal physician complete the appropriate section of the insurance form.
    c. The student in consultation with the Clinical Coordinator will complete the appropriate forms.
    d. The student will return the completed insurance form to the Program Administrator for Official Signature.
    e. The student will send the completed insurance form to the insurance company.
4) The Clinical Coordinator will notify Florida SouthWestern State College and an incident report completed.
5) The completed forms will be filed in the student's file.

Workplace Safety
Each student will do an orientation for each of his or her respective clinical sites. As part of this orientation the student will be informed of and will conform to the safety policies of the hospital. These policies include, but are not limited to: fire safety, emergency procedures, electrical safety, risk management, patient safety, infection control, hazardous materials, radiation protection, etc.

Employment Related Policy
A radiologic technology student may practice radiologic technology as a student only within the courses of an approved educational or training program in which the student is enrolled and under the direct supervision of a licensed practitioner.

If a student establishes an employment relationship involving the application of x-radiation with an employer, he/she does so outside of the scope of the above policy. Also, he/she does so without an implied student technologist relationship involving the FLORIDA SOUTHWESTERN STATE COLLEGE Radiologic Technology Program or its faculty.

Record Security and Availability
It is the policy of the program that all program- related records are kept in a secured area and are available for inspection by that student or his/her designee at all times. Records are not removed from the program office without the permission of program administration. Students that wish to see their records should ask the program administration who, in turn, will make them available. Student records are treated as confidential to third parties. Information will only be released to others with the student's written permission.

Graduate Competencies
The following are the basic graduate competencies that each student must be proficient in upon completion of the program.
The graduate will:

1. Provide basic patient care and comfort, and anticipate patient needs.

2. Provide appropriate patient education.

3. Practice radiation protection.

4. Understand basic x-ray production and interactions.

5. Operate medical imaging equipment and accessory devices.

6. Position the patient and medical imaging system to perform examinations and procedures.

7. Exercise independent judgment and discretion in the technical performance of medical imaging procedures.

8. Demonstrate knowledge of human structure and function, and pathology.

9. Demonstrate knowledge and skills relating to quality assurance activities.

10. Evaluate the performance of medical imaging systems.

11. Evaluate medical images for technical quality.

12. Demonstrate knowledge and skills relating to medical image processing.

13. Demonstrate an understanding of the safe limits of equipment operation.

14. Recognize equipment malfunctions and report them to the proper authority.

15. Demonstrate knowledge and skills relating to verbal, nonverbal, and written medical communication in patient care intervention and professional relationships.

16. Demonstrate a support of the profession's code of ethics and comply with the profession's scope of practice.

17. Perform in a competent manner a full range of radiologic procedures on children and adults in the following categories:

Head/neck	Trauma
Musculoskeletal	Bedside
Chest	Surgical
Abdominal/gastrointestinal/genitourinary	

GRADUATION REQUIREMENTS

To receive the Associate in Science degree in Radiologic Technology, students must satisfy the following requirements.

1. Complete the Program Specific Requirements for the Associate in Science Degree as specified in the Radiologic Technology Program requirements.
2. Earn a minimum grade point average of 2.0 in each radiologic technology course
3. Earn a cumulative grade point average of 2.0 in all courses, including transferred credits, which comprise the Associate in Science Degree in Radiologic Technology Program.
4. Register in the final session of attendance for any courses not previously completed which are necessary to satisfy the desired degree or certificate.
5. Fulfill all financial obligations to the College.
6. Successfully complete a minimum of 25% of the required credit hours at Florida SouthWestern State College.
7. Meet all deadlines pertaining to graduation.

DIDACTIC EVALUATION POLICIES:

Grading for all RTE courses is done on a criterion-referenced basis. Each student must demonstrate competency in learning specific, written behavioral objectives. The base criterion established for all didactic RTE courses is objective mastery at a level of at least a 75%.

Therefore, the grading scale for all RTE (Radiologic Technology) classroom core courses is:

100% - 93% = A
92% - 85% = B
84% - 75% = C
74% - 0% = F

NOTE: Individual instructors may develop their own procedure to determine the grade percentage. This procedure is explained in the instructor's course syllabus.

EVALUATION INSTRUMENTS

Typical test instruments are objective in nature, and may evaluate the students' performance in the cognitive and/or psychomotor domains. Tests are created based on the written, specific classroom learning objectives found in each class syllabus.

FAILURE OF A PROGRAM CORE (RTE) COURSE

The curriculum of the Radiologic Technology Program is comprehensive in nature, i.e., each course building upon the material learned in previous courses. Therefore, each course must be taken in sequence and passed with at least a grade of "C". In the event that a student fails to achieve a grade of "C" or better in any core course beginning with the RTE prefix the student can retake the course the next time the course is offered. Reentrance into the program will be considered under individual circumstances and will be determined by clinical availability.

If a student decides to return to the program more than one year from their last successful semester, successful competency testing (psychomotor and/or cognitive) will be required prior to readmission.

If a student fails any *two* or more RTE courses, they will be immediately dismissed from the program. Any possible reentry into the program at a future time will be determined by a review committee.

CURRICULUM SEQUENCE

The typical curriculum schedule of courses is on the next page. The RTE core courses are taught only during the semester indicated and must be taken in sequence. The College Algebra (MAC 1105) and Anatomy and Physiology I (BSC 1085C or BSC 1093C) courses are integral to the student's success in the program and therefore the program **requires** that both courses be taken before applying. The other non-core courses may be taken as corequisites at any time, either before, or during the program. When scheduling courses, RTE core courses always take precedence over non-core courses.

FLORIDA SOUTHWESTERN STATE COLLEGE Radiologic Technology Program

General Education Requirements

BSC 1085C	Anatomy and Physiology I*	4
or BSC 1093C		
BSC 1086C	Anatomy and Physiology II	4
or BSC 1094C		
MAC1105	College Algebra* (or higher)	3
ENC 1101	Composition I	3
_____	Computer Science Elective (Any CGS Course)	3
_____	Core Humanities Elective	3
_____	American Government or American History	3
		23

First Year, Fall Semester

RTE 1000	Introduction to Radiography and Patient Care	3
RTE 1001	Radiographic Terminology	1
RTE 1503	Radiographic Positioning I	4
RTE 1503L	Radiographic Positioning Lab (Clinical)	2
RTE 1418	Principles of Radiographic Exposure I	3
		13

First Year Spring Semester

RTE 1613	Radiographic Physics	4
RTE 1513	Radiographic Positioning II	4
RTE 1804	Radiology Practicum I	3
		11

First Year, Summer A Term (6 weeks)

RTE 1457	Principles of Radiographic Exposure II	2
RTE 1523	Radiographic Positioning III	3
		5

First Year, Summer C Semester (12 weeks)

RTE 1814	Radiology Practicum II	3
		3

Second Year, Fall Semester

RTE 1573	Radiologic Science Principles	3
RTE 2563	Special Radiographic Proc./Sectional Anat.	3
RTE 1824	Radiology Practicum III	3
		9

Second Year, Spring Semester

RTE 2782	Radiographic Pathology	2
RTE 2385	Radiation Biology/Protection	2
RTE 2473	Quality Assurance	2
RTE 2834	Radiology Practicum IV	3
		9

Second Year, Summer A Term (6 weeks)

RTE 2061	Radiologic Technology Seminar	2
RTE 2844	Radiology Practicum V	2
		4
	TOTAL	**77**

*** Successful completion of these courses is required before applying to the program.**

Appendix A

Clinical Forms

Clinical Competency Evaluation **General Imaging Procedures**

Student: _____ Date: _____

Exam: _____ ID#: _____

PERFORMANCE EVALUATION S = Satisfactory U = Unsatisfactory

*1. Patient properly identified & appropriateness of request verified	S / U
2. Properly explained exam, and verified pregnancy	S / U
3. Properly obtained patient history	S / U
4. Prepared patient; changing patient being mindful of modesty & remove artifacts	S / U
5. Proficiently utilize equipment & properly prepared facilities	S / U
*6. Selected proper image receptor method (table top, table bucky, wall bucky, or grid)	S / U
7. Properly select patient name and accession number from the worklist	S / U
*8. Placed patient in correct position(s)	S / U
* 9. Demonstrate correct central ray angle & alignment (CR properly angled, aligned to part & IR)	S / U
*10. Selected appropriate technical factors & correct source-to-image receptor distance	S / U
11. Utilized appropriate collimation	S / U
12. Practiced proper radiation safety & side markers	S / U
13. Utilized proper breathing instructions	S / U
14. Properly display images on the computer monitor	S / U
15. Images within proper exposure index range	S / U
16. Performed procedure in an orderly & timely manner	S / U
17. Continuously maintained patient safety	S / U
18. Demonstrated proper image processing (to include annotation when necessary)	S / U
19. Demonstrated proper archiving of images to PACS	S / U
20. Properly communicates post-procedure instructions, walk patient out, & clean radiographic room	S / U

Repeats: Y or N (circle)

_____

Evaluating technologist's Signature

Note: Competencies proceeded by an asterisk (*) must be successfully completed or the evaluation is terminated.

Form must be returned to the clinical instructor for image evaluation and grade computation.

IMAGE EVALUATION (Performed by Clinical Coordinator/associate or Clinical Instructor ONLY)

1. Anatomy positioned correctly & displayed correctly on monitor	S / U
2. Appropriate structures shown per projection (Identification of anatomy)	S / U
3. Conscientious collimation utilized	S / U
4. Displays knowledge of techniques & exposure indicator values	S / U
5. Radiographic quality (markers, motion, artifacts)	S / U

Note: Grade is determined by dividing the number of "S" answers by 25.
(25 "S" = 100%, 24 "S" = 96%, 23 "S" = 92%, 22 "S" = 88%, & 21 & below = exam termination) Total: _____/25

Comments and area for improvement:

_____

_____

_____ _____

Coordinator / Instructor Signature ONLY Student Signature Date

RAD--21(04//2021)

%

Clinical Competency Evaluation **Geriatric Imaging Procedure**

Student: _____
Exam: _____ Date: _____
ID# _____(**65 or older Physically or Cognitively Impaired as a Result of Aging**)

PERFORMANCE EVALUATION S = Satisfactory U = Unsatisfactory

*1. Patient properly identified & appropriateness of request verified S / U
2. Properly explained exam adapting communication S / U
3. Properly obtained patient history S / U
4. Prepared patient; changing patient being mindful of modesty & remove artifacts S / U
5. Proficiently utilize equipment & properly prepared facilities S / U
*6. Selected proper image receptor method (table top, table bucky, wall bucky, or grid) S / U
7. Properly select patient name and accession number from the worklist S / U
*8. Placed patient in correct position(s), providing appropriate assistance & modifications S / U
* 9. Demonstrate correct central ray angle & alignment (CR properly angled, aligned to part & IR) S / U
*10. Modified technical factors & utilized correct source-to-image receptor distance S / U
11. Utilized appropriate collimation S / U
12. Practiced proper radiation safety & side markers S / U
13. Utilized proper breathing instructions S / U
14. Properly display images on the computer monitor S / U
15. Images within proper exposure index range S / U
16. Performed procedure in an orderly & timely manner S / U
17. Continuously maintained patient safety & patient assessment S / U
18. Demonstrated proper image processing (to include annotation when necessary) S / U
19. Demonstrated proper archiving of images to PACS S / U
20. Properly communicates post-procedure instructions, walk patient out, & clean radiographic room S / U

Repeats: Y or N (circle)

_____
Evaluating technologist's Signature

Note: Competencies proceeded by an asterisk (*) must be successfully completed or the evaluation is terminated.
Form must be returned to the clinical instructor for image evaluation and grade computation.

IMAGE EVALUATION (Performed by Clinical Coordinator/associate or Clinical Instructor ONLY)

1. Anatomy positioned correctly & displayed correctly on monitor S / U
2. Appropriate structures shown per projection (Identification of anatomy) S / U
3. Conscientious collimation utilized S / U
4. Displays knowledge of techniques & exposure indicator values S / U
5. Radiographic quality (markers, motion, artifacts) S / U

Note: Grade is determined by dividing the number of "S" answers by 25.
(25 "S" = 100%, 24 "S" = 96%, 23 "S" = 92%, 22 "S" = 88%, & 21 & below = exam termination) Total: _____/25

Comments and area for improvement:

_____
_____
_____

_____ _____
Coordinator / Instructor Signature ONLY Student Signature Date

RAD--21(04//2021)

%

Clinical Competency Evaluation **Pediatric Imaging Procedure**

Student: _____

Exam: _____ Date: _____

ID# _____ (**6 yrs of age or younger**)

PERFORMANCE EVALUATION S = Satisfactory U = Unsatisfactory

*1. Patient properly identified & appropriateness of request verified	S/U
2. Properly explained exam adapting communication	S/U
3. Properly obtained patient history	S/U
4. Prepared patient; changing patient being mindful of modesty & remove artifacts	S/U
5. Proficiently utilize equipment & properly prepared facilities	S/U
*6. Selected proper image receptor method (table top, table bucky, wall bucky, or grid)	S/U
7. Properly select patient name and accession number from the worklist	S/U
*8. Placed patient in correct position(s), providing appropriate assistance & modifications	S/U
* 9. Demonstrate correct central ray angle & alignment (CR properly angled, aligned to part & IR)	S/U
*10. Modified technical factors & utilized correct source-to-image receptor distance	S/U
11. Utilized appropriate collimation	S/U
12. Practiced proper radiation safety & side markers	S/U
13. Utilized proper breathing instructions	S/U
14. Properly display images on the computer monitor	S U
15. Images within proper exposure index range	S/U
16. Performed procedure in an orderly & timely manner	S/U
17. Continuously maintained patient safety & patient assessment	S/U
18. Demonstrated proper image processing (to include annotation when necessary)	S/U
19. Demonstrated proper archiving of images to PACS	S U
20. Properly communicates post-procedure instructions, walk patient out, & clean radiographic room	S/U

Repeats: Y or N (circle)

_____

Evaluating technologist's Signature

Note: Competencies proceeded by an asterisk (*) must be successfully completed or the evaluation is terminated.

Form must be returned to the clinical instructor for image evaluation and grade computation.

IMAGE EVALUATION (Performed by Clinical Coordinator/associate or Clinical Instructor ONLY)

1.	Anatomy positioned correctly & displayed correctly on monitor	S/U
2.	Appropriate structures shown per projection (Identification of anatomy)	S/U
3.	Conscientious collimation utilized	S/U
4.	Displays knowledge of techniques & exposure indicator values	S/U
5.	Radiographic quality (markers, motion, artifacts)	S/U

Note: Grade is determined by dividing the number of "S" answers by 25.
(25 "S" = 100%, 24 "S" = 96%, 23 "S" = 92%, 22 "S" = 88%, & 21 & below = exam termination) Total: _____/25

Comments and area for improvement:

_____

_____

_____

_____ _____

Coordinator / Instructor Signature ONLY Student Signature Date

RAD--21(04//2021)

%

Clinical Competency Evaluation **Mobile Imaging Procedures**

Student: _____
Exam: _____ Date: _____
ID# _____

PERFORMANCE EVALUATION S = Satisfactory U = Unsatisfactory

*1. Patient properly identified & appropriateness of request verified S/U
2. Properly explained exam, and verified pregnancy S/U
3. Properly obtained patient history S/U
4. Prepared patient; changing patient being mindful of modesty & remove artifacts S/U
5. Proficiently utilize mobile equipment & properly prepared patient's room prior to entry S/U
*6. Selected proper image receptor method (table top or grid) S/U
7. Properly select patient name and accession number from the worklist S/U
*8. Placed patient in correct position(s) & modified accordingly S/U
* 9. Demonstrate correct central ray angle & alignment (CR properly angled, aligned to part & IR) S/U
*10. Selected appropriate technical factors & correct source-to-image receptor distance S/U
11. Utilized appropriate collimation S/U
12. Practiced proper radiation safety for self & others; including standing 6' during exposure & utilized side markers S/U
13. Utilized proper breathing instructions S/U
14. Properly display images on the computer monitor S/U
15. Images within proper exposure index range S/U
16. Performed procedure in an orderly & timely manner S/U
17. Continuously maintained patient safety S/U
18. Demonstrated proper image processing (to include annotation when necessary) S/U
19. Demonstrated proper archiving of images to PACS S/U
20. Patient's room left neat and clean after the mobile procedure & mobile unit returned, cleaned & charged properly S/U

Repeats: Y or N (circle)

_____
Evaluating technologist's Signature

Note: Competencies proceeded by an asterisk (*) must be successfully completed or the evaluation is terminated.
Form must be returned to the clinical instructor for image evaluation and grade computation.

IMAGE EVALUATION (Performed by Clinical Coordinator/associate or Clinical Instructor ONLY)

1. Anatomy positioned correctly & displayed correctly on monitor S/U
2. Appropriate structures shown per projection (Identification of anatomy) S/U
3. Conscientious collimation utilized S/U
4. Displays knowledge of techniques & exposure indicator values S/U
5. Radiographic quality (markers, motion, artifacts) S/U

Note: Grade is determined by dividing the number of "S" answers by 25.
(25 "S" = 100%, 24 "S" = 96%, 23 "S" = 92%, 22 "S" = 88%, & 21 & below = exam termination) Total: _____/25

Comments and area for improvement:

_____
_____
_____

_____ _____ %
Coordinator / Instructor Signature ONLY Student Signature Date

RAD--21(04//2021)

Clinical Competency Evaluation **Trauma Imaging Procedures**

Student: _____
Exam: _____ Date: _____
ID# _____

PERFORMANCE EVALUATION S = Satisfactory U = Unsatisfactory

*1. Patient properly identified & appropriateness of request verified	S/U
2. Properly explained exam, and verified pregnancy	S/U
3. Properly obtained patient history	S/U
4. Prepared patient; changing patient being mindful of modesty & remove artifacts	S/U
5. Proficiently utilize equipment & properly prepared facilities	S/U
*6. Selected proper image receptor method (table top, table bucky, wall bucky, or grid)	S/U
7. Properly select patient name and accession number from the worklist	S/U
*8. Properly evaluates patient condition & alters patient positioning appropriately	S/U
* 9. Demonstrate correct central ray angle & alignment (CR properly angled, aligned to part & IR)	S/U
*10. Selected appropriate technical factors & correct source-to-image receptor distance	S/U
11. Utilized appropriate collimation	S/U
12. Practiced proper radiation safety & side markers	S/U
13. Utilized proper breathing instructions	S/U
14. Properly display images on the computer monitor	S/U
15. Images within proper exposure index range	S/U
16. Performed procedure in an orderly & timely manner	S/U
17. Continuously monitors patient condition & maintains patient safety	S/U
18. Demonstrated proper image processing (to include annotation when necessary)	S/U
19. Demonstrated proper archiving of images to PACS	S/U
20. Properly communicates post-procedure instructions, walk patient out, & clean radiographic room	S/U

Repeats: Y or N (circle)

_____
Evaluating technologist's Signature

Note: Competencies proceeded by an asterisk (*) must be successfully completed or the evaluation is terminated.
Form must be returned to the clinical instructor for image evaluation and grade computation.

IMAGE EVALUATION (Performed by Clinical Coordinator/associate or Clinical Instructor ONLY)

1. Anatomy positioned correctly & displayed correctly on monitor	S/U
2. Appropriate structures shown per projection (Identification of anatomy)	S/U
3. Conscientious collimation utilized	S/U
4. Displays knowledge of techniques & exposure indicator values	S/U
5. Radiographic quality (markers, motion, artifacts)	S/U

Note: Grade is determined by dividing the number of "S" answers by 25.
(25 "S" = 100%, 24 "S" = 96%, 23 "S" = 92%, 22 "S" = 88%, & 21 & below = exam termination) Total: _____/25

Comments and area for improvement:

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_____
_____

_____ _____
Coordinator / Instructor Signature ONLY Student Signature Date

RAD--21(04//2021)

%

Clinical Competency Evaluation **Fluoroscopy Imaging Procedures**

Student: _____ Date:_____
Exam: _____ ID#: _____

PERFORMANCE EVALUATION S = Satisfactory U = Unsatisfactory

*1 Patient properly identified & appropriateness of request verified S/U
2. Properly explained exam, and verified pregnancy S/U
3. Properly obtained patient history S/U
4. Prepared patient; changing patient being mindful of modesty & remove artifacts S/U
*5. Properly prepare contrast material S/U
6. Proficiently utilize equipment & properly prepared facility for fluoroscopy S/U
7. Properly select patient name and accession number from the worklist S/U
8. Proficiently prepare computer for fluoroscopy S/U
9. Properly utilizes radiation safety measures: shields self, others, & applied fluoroscopy drape S/U
10. Properly selects exposure factors for contrast media & within proper exposure index range S/U
11. Properly and effectively communicates with patient and radiologist throughout procedure S/U
12. Effectively assists patient and radiologist throughout procedure S/U
*13. Maintains control & properly positions patient for overhead imaging (OHI) S/U
*14. Selected proper image receptor method for overhead imaging (table top, table bucky, wall bucky, or grid) S/U
*15. Demonstrate correct central ray angle & alignment for OHI (CR properly angled, aligned to part & IR) S/U
16. Utilized conscientious collimation & side markers S/U
17. Demonstrated the ability to adapt to new & difficult situations. S/U
18. Properly display images on the computer monitor S/U
19. Performed procedure in an orderly & timely manner S/U
20. Continuously monitors patient & maintained patient safety S/U
21. Demonstrated proper image processing (to include annotation when necessary) S/U
22. Demonstrated proper archiving of images to PACS S/U
23. Communicates post-procedure instructions, walk patient out, & clean radiographic room S/U

_____
Evaluating technologist's Signature

Note: Competencies proceeded by an asterisk (*) must be successfully completed or the evaluation is terminated. Form must be returned to the clinical instructor for image evaluation and grade computation.

IMAGE EVALUATION (Performed by Clinical Coordinator/associate or Clinical Instructor ONLY)

1. Anatomy positioned correctly & displayed correctly on monitor S/U
2. Appropriate structures shown per projection (Identification of anatomy) S/U
3. Conscientious collimation utilized S/U
4. Displays knowledge of techniques & exposure indicator values S/U
5. Radiographic quality (markers, motion, artifacts) S/U

Note: Grade is determined by dividing the number of "S" answers by 28.
(28 "S" = 100%, 27 "S" = 96%, 26 "S" = 93%, 25 "S" = 89%, 24"S" = 86%, 23 & below = exam termination) Total: _____/28

Comments and area for improvement:

_____
_____
_____

_____ _____ %
Coordinator / Instructor Signature ONLY Student Signature Date

RAD--21(06//2021

Clinical Competency Evaluation **Surgical Imaging Procedures (C-Arm)**

Student: _____ Date: _____

Exam: _____ ID# _____

PERFORMANCE EVALUATION S = Satisfactory U = Unsatisfactory

*1.	Patient properly identified & appropriateness of request verified	S/U
2	Properly obtained patient history	S/U
3.	Demonstrates Radiation safety measures; ensures lead aprons are worn prior to exposure	S/U
*4.	Properly positions the C-arm and workstation in the operating procedure room	S/U
*5.	Properly select patient name and accession number from the worklist	S/U
*6.	Proficiently orient and maneuver the C-arm during procedure	S/U
*7.	Proficiently identify & utilize all C-arm locks during the procedure	S/U
*8.	Maintains sterile field throughout the procedure	S/U
* 9.	Demonstrate correct C-arm angle & alignment (CR properly angled or aligned to part)	S/U
10.	Demonstrates proper orientation of images on the computer monitor	S/U
11.	Utilized appropriate collimation	S/U
12.	Proficiently manipulates images when necessary for proper image brightness & contrast	S/U
13.	Communicates effectively to anesthesia during procedure	S/U
14.	Communicates effectively with OR staff	S/U
15.	Demonstrates critical thinking skills throughout the procedure	S/U
16.	Demonstrates proper usage of continuous & intermittent fluoroscopy	S/U
17.	Demonstrates the ability to reset the fluoroscopy timer	S/U
18.	Continuously monitors patient condition & maintains patient safety	S/U
19.	Demonstrates proper image processing (to include annotation when necessary)	S/U
20.	Demonstrates proper archiving of images to PACS	S/U
21.	Properly cleans the C-arm after the procedure	S/U
22.	Demonstrates self- confidence while completing the procedure in a timely manner	S/U
23.	Demonstrates a working knowledge of anatomy during the procedure	S/U
24.	Properly stores C-arm in the correct location	S/U

_____

Evaluating technologist's Signature

Note: Competencies proceeded by an asterisk (*) must be successfully completed or the evaluation is terminated.

Form must be returned to the clinical instructor for image evaluation and grade computation.

Image Evaluation with the student (Performed by Clinical Instructor, Clinical Associate, or Clinical Coordinator)

25.	Ascertain that the images demonstrate correct centering based on anatomy demonstrated	S/U
26.	Ascertain the images demonstrate proper brightness & contrast	S/U
27.	Ascertain the student understands the procedure	S/U
28.	Ascertain the student has a working knowledge of anatomy based on procedure performed	S/U

Note: Grade is determined by dividing the number of "S" answers by 25.
(28 "S" = 100%, 27 "S" = 96%, 26 "S" = 93%, 25 "S" = 89%, 24"S" = 86%, & below 24 = exam termination)

Total: _____/28

Comments and area for improvement:

_____

_____

_____ _____

Coordinator / Instructor Signature ONLY Student Signature Date

RAD--21(06//2021

%

Level 1 Clinical Competency Evaluation
Radiographic Control Panel & Accessories

Date: _____

Student: _____

1.	Operate the on/off switch.	Yes / No
2.	Demonstrate the proper tube warm-up procedure.	Yes / No
3.	Select a specified kilovoltage setting.	Yes / No
4.	Select specified mAs setting.	Yes / No
5.	Select an appropriate time setting for a breathing technique (i.e.: 3 seconds)	Yes / No
6.	When given a mAs value, select a technique to minimize the chance of motion	Yes / No
7.	Collimate the field size to 10" x 12" portrait.	Yes / No
8.	Demonstrate the proper use of the rotor and exposure control switches.	Yes / No
9.	Demonstrate how one knows when the x-ray exposure is properly terminated.	Yes / No
10.	Demonstrate how to select a tabletop technique using correct controls.	Yes / No
11.	Place an image receptor landscape in the vertical bucky.	Yes / No
12.	Set a technique using a 72 inch SID and a small focal spot.	Yes / No
13.	Demonstrate proper automatic exposure control selection.	Yes / No
14.	Properly place a portable grid on an image receptor.	Yes / No
15.	Identify the EI range(s).	Yes / No

Note: Grade is determined by dividing the number of YES answers by 16
(15 YES = 100%, 14 YES = 93.3%, 13 YES = 86.6%, 12 & below = exam termination)

Comments:

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_____ _____ _____ ☐

Evaluator's Signature Date Student Signature %GRADE

Evaluator must return this form to the clinical instructor for grade computation.
RAD-022(07/2018)

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

Date: _____
Student: _____

1.	From the computer monitor, properly utilize worklist.	Yes / No
2.	Demonstrate proper selection of body part/specific exam and view.	Yes / No
3.	Demonstrate how to start an image receptor (cassette) only exam on the computer.	Yes / No
4.	Properly start and end exams on computer.	Yes / No
5.	Position digital detector, monitor, foot pedal, bucky, and OH tube for fluoro readiness.	Yes / No
6.	Install and remove the table footrest & fluoro drape.	Yes / No
7.	Identify five different radiographic protection devices	Yes / No
8.	Operate table top longitudinal / transverse directional switches.	Yes / No
9.	Manipulate the table angle to a specified angle.	Yes / No
10.	Manipulate the longitudinal, transverse, & vertical overhead tube controls.	Yes / No
11.	Set vertical tube control to a specified SID (table top & bucky).	Yes / No
12.	Manipulate overhead tube swivel lock properly.	Yes / No
13.	Manipulate overhead tube to a specified angle while maintaining appropriate SID.	Yes / No
14.	Manipulate overhead tube detents for correct alignment to vertical and table bucky	Yes / No
15.	Properly prepare images (arrange & annotate) with assistance for Radiologist	Yes / No

Note: Grade is determined by dividing the number of YES answers by 15
(15 YES = 100%, 14 YES = 933%, 13 YES = 86.6%, 12 & below = exam termination)

Comments **and area for improvement:**

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_____ _____ _____ %
Evaluator's Signature Date Student Signature GRADE

Evaluator must return this form to the clinical instructor for grade computation.
RAD-023(07/2018)

Level 1 Clinical Competency Evaluation
Patient Care and Safety

Student: _____ Date: _____

The student must correctly demonstrate the knowledge of:

1.	Patient safety while patient is unattended	Yes / No
2.	Identifying patient data from exam request form (isolation, history, date of exam, etc.)	Yes / No
3.	Differential treatment of patient needs with respect to age, cultural differences, disabilities, etc.	Yes / No
4.	Patient confidentiality in accordance with HIPPA regulations	Yes / No
5.	To locate contrast and other ancillary equipment (i.e. barium bags, etc.)	Yes / No
6.	Properly restocking room on a daily basis	Yes / No
7.	Preparing the radiographic table to maximize patient comfort. (Blanket warmer, mat, etc.)	Yes /No
8.	Care of patient medical equipment (e.g.: O_2 tank, IV tubing, etc.) and location of emergency life support equipment	Yes / No
9.	Department protocol regarding life-threatening emergencies (calling codes, etc).	Yes / No
10.	The use of departmental contrast media consent forms.	Yes / No
11.	How to correctly identify in-patients and out-patients	Yes / No
12.	Isolation precautions including DNR, fall precautions, altered mental status…	Yes / No
13.	Proper communicate and with respectfulness with all patients	Yes / No
14.	Where to locate patients and how to prepare them for exams	Yes / No
15.	The use of the following; sharps container, positioning aids, foot stool, pediatric and adult immobilization devices	Yes / No

Note: Grade is determined by dividing the number of YES answers by 15.
(15 YES = 100%, 14 YES = 93.33%, 13 YES = 86.6%, 12 & below = exam termination)

Comments:

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_____ _____ _____

Evaluator's Signature Date Student Signature

Evaluator must return this form to the clinical instructor for grade computation.
RAD-024(1/09)

Level 1 Clinical Competency Evaluation
Equipment Manipulation/Identification, C-Arm

Date: _____

Student: _____

1. Safely maneuver C-arm & workstation engaging/disengaging brakes.	Yes / No
2. Safely connect & disconnect all cables	Yes / No
3. Safely turn fluoroscopic system on & off.	Yes / No
4. Position image intensifier, TV monitor, and foot pedal for fluoro readiness	Yes / No
5. Understand & manipulate all movements, locks, & steering handle	Yes / No
6. Prepare patient information screen for fluoroscopy imaging	Yes / No
7. Utilize Image Annotation Screen	Yes / No
8. Utilize Image Directory Screen	Yes / No
9. Properly orient image on fluoro screen	Yes / No
10. Properly utilize technique settings, Alarm Reset, & collimation	Yes / No
11. Properly utilize Magnification	Yes / No
12. Properly utilize Save & Workstation (Swap)	Yes / No
13. Properly utilize Brightness/Contrast/Auto	Yes / No
14. Properly utilize high level fluoro	Yes / No
15. Properly locate & understand the Status bar	Yes / No

Note: Grade is determined by dividing the number of YES answers by 15

(15 YES = 100%, 14 YES = 93.33%, 13 YES = 86.6%, 12 & below = exam termination)

Comments:

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Evaluator's Signature Student Signature Date

GRADE %

Evaluator must return this form to the clinical instructor for grade computation.

RAD- 23 (01/09)

Radiologic Technology Program
STUDENT PERFORMANCE EVALUATION

FLORIDA SOUTHWESTERN STATE COLLEGE

STUDENT _____ **DATE** _____

_____ _____ _____
ASSIGNMENT AREA **EVALUATOR NAME** **EVALUATOR SIGNATURE**

4 = Above Standards 3 = Meets Standards 2 = Needs Minor Improvement 1 = Needs Major Improvement

(circle one)

1.	**Student / Patient Relationship**		4	3	2	1
	attitude, communication, concern, patient safety					
2.	**Student / Radiographer Relationship**			3	2	1
	cooperation, communication, attitude					
3.	**Dependability and Responsibility**			3	2	1
	punctual, available, conscientious					
4.	**Personal Characteristics**		4	3	2	1
	self confidence					
5.	**Attitude toward Criticism**			3	2	1
	accepts criticism, direction, and suggestions well					
6.	**Attitude toward Procedure**		4	3	2	1
	interest in procedure being performed, eager to learn, asks questions					
7.	**Initiative**					
	a.	performs routine duties without being asked to do so		3	2	1
	b.	tries unfamiliar cases		3	2	1
	c.	eagerly performs exams learned		3	2	1
8.	**Organization and Perseverance**					
	a.	adapts to situations and exams	4	3	2	1
	b.	applies organization in procedures and utilizes foresight	4	3	2	1
	c.	follows through on assigned tasks		3	2	1
9.	**Judgment**					
	ability to think and act calmly, logically, and rapidly under stress		4	3	2	1
10.	**Clinical Ability**					
	a.	knowledge of positioning	4	3	2	1
	b.	knowledge of exposure factors	4	3	2	1
	c.	concentrates on fundamentals		3	2	1
	d.	practices proper radiation protection		3	2	1
	e.	procedure output – completes procedures in a timely manner	4	3	2	1
11.	**Quality of Procedure**					
		neatness, accuracy, efficiency (low repeat ratio)		3	2	1
12.	**Equipment and Supplies**					
	a.	careful / professional use of . .		3	2	1
	b.	knowledge of . . .		3	2	1
	c.	routine stocking of room		3	2	1

Comments:_____
_____
_____

Please make any additional comments on the back side of this form.

_____ _____

Radiologic Technology Program

STUDENT PERFORMANCE EVALUATION – MOBILE Radiography

STUDENT _____ **DATE** _____

4 =Above Standard 3 =Meets Standard 2 = Needs Minor Improvement 1 = Needs Major Improvement

1.	**Student / Patient Relationship**				
	attitude, communication, concern, patient safety	4	3	2	1
2.	**Student / Radiographer Relationship**				
	cooperation, communication, attitude		3	2	1
3.	**Dependability and Responsibility**				
	punctual, available, conscientious		3	2	1
4.	**Personal Characteristics**				
	self confidence	4	3	2	1
5.	**Attitude toward Criticism**				
	accepts and implements criticism, direction, and suggestions well		3	2	1
6.	**Attitude toward Portable Procedure**				
	interest in procedure being performed, eager to learn, asks questions	4	3	2	1
7.	**Initiative for Portable Exams**				
	a. performs routine duties without being asked to do so		3	2	1
	b. tries unfamiliar cases		3	2	1
	c. eagerly performs exams learned		3	2	1
8.	**Portable Organization and Perseverance**				
	a. adapts to situations and exams (trauma/recovery room)	4	3	2	1
	b. applies organization in procedures and utilizes foresight	4	3	2	1
	c. follows through on assigned tasks		3	2	1
9.	**Judgment During Portable Radiography**				
	ability to think and act calmly, logically, and rapidly under stress	4	3	2	1
10.	**Portable Clinical Ability**				
	a. accuracy of positioning	4	3	2	1
	b. adjustment exposure factors for portable exams	4	3	2	1
	c. concentrates on fundamentals (grid, SID…)		3	2	1
	d. practices proper radiation protection		3	2	1
	e. procedure output–completes procedures in a timely manner	4	3	2	1
11.	**Quality of Portable Procedure**				
	neatness, accuracy, efficiency (low repeat ratio)		3	2	1
12.	**Portable Equipment and Supplies**				
	a. careful / professional use of portable units		3	2	1
	b. proper supplies for portable exams		3	2	1

Comments:_____

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_____ _____

Student's Signature of Acknowledgement Clinical Instructor Signature

Evaluator's Signature ____ _____ (01/09) RAD-039

Radiologic Technology Program
STUDENT PERFORMANCE EVALUATION -- SURGERY

STUDENT _____ DATE _____

4 =Above Standard 3 = Meets Standard 2 = Needs Minor Improvement 1 = Needs Major Improvement

1.	**Student / Physician Relationship**					
	attitude, communication, cooperation	4	3	2	1
2.	**Student / Radiographer Relationship**					
	cooperation, communication, attitude		3	2	1
3.	**Dependability and Responsibility**					
	punctual, available, conscientious		3	2	1
4.	**Personal Characteristics**					
	self confidence	4	3	2	1
5.	**Attitude toward Criticism**					
	accepts and implements criticism, direction, and suggestions well		3	2	1
6.	**Attitude toward Procedure**					
	interest in procedure being performed, eager to learn, asks questions	4	3	2	1
7.	**Initiative toward operative procedures**					
	a. tries unfamiliar cases		3	2	1
	b. eagerly performs exams learned		3	2	1
8.	**Organization and Perseverance**					
	a. adapts to situations and exams	4	3	2	1
	b. applies organization in procedures and utilizes foresight	4	3	2	1
	c. follows through on assigned tasks		3	2	1
9.	**Operative Judgment**					
	ability to think and act calmly, logically, and rapidly under stress	4	3	2	1
10.	**Operative Clinical Ability**					
	a. ability to perform operative exams	4	3	2	1
	b. knowledge of exposure factors	4	3	2	1
	c. concentrates on fundamentals (tube/part/IR alignment)		3	2	1
	d. practices proper sterile technique		3	2	1
	e. procedure output–completes procedures in a timely manner	4	3	2	1
11.	**Quality of Operative Procedure**					
	neatness, accuracy, efficiency (low repeat ratio)		3	2	1
12.	**Equipment and Supplies**					
	a. performs proper radiation procedures		3	2	1
	b. ability to operate equipment proficiently		3	2	1

Comments:_____

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_____

_____ _____

Student's Signature of Acknowledgement Clinical Instructor Signature

Evaluator's Signature _____

(07/2018) RAD-041

Radiologic Technology Program
Clinical Performance Evaluation
Patient Transporting

Student: _____ Rotational Date: _____

1. The student can demonstrate the ability to interpret transport slips according to:
   a. patient name _____ Yes _____ No
   b. location _____ Yes _____ No
   c. mode of transportation _____ Yes _____ No
   d. special equipment for transportation (O_2, IV's, restraints, etc.) _____ Yes _____ No
2. The student can demonstrate the ability to move equipment through the hallways.
   _____ Yes _____ No
3. The student can demonstrate the ability to properly identify patients.
   _____ Yes _____ No
4. The student can demonstrate the proper method of checking out a house patient to be transported to the radiology department.
   _____ Yes _____ No
5. The student can demonstrate the proper handling of O_2 apparatus, IV's and any other equipment apparatus.
   _____ Yes _____ No
6. The student can demonstrate the ability to locate patient floors and hospital departments.
   _____ Yes _____ No
7. The student can demonstrate the proper method of transferring a patient from bed to transportation device.
   _____ Yes _____ No
8. The student can demonstrate the proper method of transferring a patient from chair to transportation device.
   _____ Yes _____ No
9. The student can demonstrate the proper method of transferring a patient from transportation device to radiographic table.
   _____ Yes _____ No

_____ _____

Evaluator's Signature Clinical Instructor's Signature

_____

Student's Signature
RAD-032(1/09)

Radiologic Technology Program
Clinical Performance Evaluation
Special Procedures / Angiography

Student: _____ Rotational Date: _____

1. Identify and describe the operation of the following equipment:
   a. radiographic control panel
   b. image processing panel
   c. automatic injector and its controls
   _____ Yes _____ No

2. Describe the process of D.S.A. (digital subtraction angiography)
   _____ Yes _____ No

3. Setup and prepare a sterile tray.
   _____ Yes _____ No

4. Load the automatic injector.
   _____ Yes _____ No

5. Position the imaging system and table.
   _____ Yes _____ No

6. List the basic components of a typical angiographic tray.
   _____ Yes _____ No

7. Select a requested catheter and appropriate guide wire.
   _____ Yes _____ No

8. Describe the positioning procedure for a typical angiogram
   _____ Yes _____ No

9. Demonstrate the proper procedure for monitoring a patient's vital signs
   a. Blood Pressure
   b. Pulse
   c. Respiration
   d. Temperature
   _____ Yes _____ No

10. Understands basic anatomy of the arterial and venous systems.

_____ _____
Evaluator's Signature Clinical Instructor's Signature

_____

Student's Signature

RAD-033(01/09)

Radiologic Technology Program
Clinical Performance Evaluation
Nuclear Medicine

Student: _____

Rotational Date: _____

1. The student can describe how nuclear medicine studies are performed.
   _____ Yes _____ No

2. The student can describe how radioactive material is injected.
   _____ Yes _____ No

3. The student can describe the concept of radioactive half-life.
   _____ Yes _____ No

4. The student can demonstrate the basic operation of the nuclear medicine imaging camera.
   _____ Yes _____ No

5. The student can describe the patient preps and how conventional radiography contrast media can interfere with nuclear medicine examinations.
   _____ Yes _____ No

6. The student can assist with basic examinations.
   _____ Yes _____ No

Comments:

_____
_____
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_____ _____

Evaluator's Signature Clinical Instructor's Signature

_____

Student's Signature
RAD-035(01/09)

Radiologic Technology Program
Clinical Performance Evaluation
Medical Sonography

Student: _____

Rotational Date: _____

1. The student can describe the basic theory of sonographic imaging.
   _____ Yes _____ No

2. The student can identify basic anatomy from sonographic images.
   _____ Yes _____ No

3. The student understands patient preparations.
   _____ Yes _____ No

4. The student can demonstrate the processing of images.
   _____ Yes _____ No

5. The student can demonstrate the basic operation of sonographic equipment.
   _____ Yes _____ No

Comments:
_____
_____
_____
_____
_____

_____ _____
Evaluator's Signature Clinical Instructor's Signature

_____
Student's Signature

RAD-036(01/09)

Radiologic Technology Program
Clinical Performance Evaluation
Computed Tomography (C.T.)

Student: _____

Rotational Date: _____

1. The student can describe the basic theory of C.T.
   _____ Yes _____ No

2. The student can explain exams performed, patient preps and contrast media utilized.
   _____ Yes _____ No

3. The student can explain the scanning procedure from scout to programming of cuts.
   _____ Yes _____ No

4. The student can demonstrate operation of the console.
   _____ Yes _____ No

5. The student can demonstrate the manipulation of the table.
   _____ Yes _____ No

6. The student can demonstrate the performance of a head scan (with assistance).
   _____ Yes _____ No

7. The student can demonstrate the performance of an abdominal scan (with assistance).
   _____ Yes _____ No

8. The student can demonstrate image retrieval from the computer and transfer to the PACS system.
   _____ Yes _____ No

9. The student can identify basic anatomy from cross-sectional images.
   _____ Yes _____ No

10. Please write any comments on the reverse side of this form.

_____ _____
Evaluator's Signature Clinical Instructor's Signature

_____
Student's Signature

RAD-037(07/2018)

Radiologic Technology Program
Clinical Performance Evaluation
Magnetic Resonance Imaging (M.R.I.)

Student: _____ Rotational Date: _____

1. The student has completed the FSW MRI Screening Form prior to entering the safety zone and reviewed with an MRI technologist.
   _____ Yes _____ No

2. The student can describe the basic theory of Magnetic Resonance Imaging.
   a. the magnet _____ Yes _____ No
   b. radio frequency signal _____ Yes _____ No
   c. receiver coil _____ Yes _____ No
   d. computer constructed image on TV monitor _____ Yes _____ No

3. The student can demonstrate the patient positioning for head and spine scanning.
   _____ Yes _____ No

4. The student can operate the controls to move the scanning table.
   _____ Yes _____ No

5. The student can enter a patient's name using the control panel.
   _____ Yes _____ No

6. The student can select a sequence and program it with assistance.
   _____ Yes _____ No

7. The student can transfer images if necessary.
   _____ Yes _____ No

Please write any comments on the reverse side of this form.

_____ _____
Evaluator's Signature Clinical Instructor's Signature

_____
Student's Signature

RAD-038(07/2018)

Radiologic Technology Program
Absence Report

Student: _____

Date: _____

Base Hospital: _____

Rotation or assigned area: _____

Date(s) absent: _____

Shift time: _____

Number of hours absent: _____

When do you plan to make up this time? _____

_____ _____
Student Signature Clinical Instructor

_____
Approved by Clinical Coordinator

Instructions:

1. It is the student's responsibility to deliver the Absence Report form to the clinical instructor.
2. The form MUST be approved prior to a student's make up day(s).
3. This form becomes part of the student's permanent attendance record.

RAD-040 (06/2021)

Demerit Form

Radiologic Technology Program
Student Counseling Report – Demerit

Student_____**Clinical Facility** _____

Semester_____**Date**_____

DEMERIT* – One Percentage Point Subtracted from Final Clinical Grade for each Occurrence

1. _____Tardy / leave early
2. _____Improper reporting of clinical absence
3. _____Absence before or after a scheduled holiday or college break
4. _____Restricting or impeding clinical output, misuse of clinical time
5. _____Violation of dress code (ZERO tolerance)
6. _____Improper storage of radiation dosimeter
7. _____No personal lead ID markers in clinical area
8. _____Use of another's lead ID markers
9. _____Improper use of recommended S.I.D.
10. _____Failure to properly place markers, labels, time indicators, etc., on radiographs
11. _____Improper computer documenting of procedure performed.
12. _____Improper radiation protection
13. _____Failure to have weekly evals promptly completed by a full semester's end.

DEMERIT* – Two Percentage Points Subtracted from Final Clinical Grade for each Occurrence.

1. _____Failure to follow professional standards
2. _____Inconsiderate treatment of patients, visitors, students, or hospital employees
3. _____Engaging in disorderly conduct that could ultimately threaten the well being of any patient, visitor, student, or hospital employee.
4. _____Insubordination – refusing to follow orders or directions, arguing with supervisor.
5. _____Unexcused absences in a full semester – More than two for a full semester; more than one in a short semester.
6. _____Leaving clinical without permission from a program official
7. _____Failure to complete an examination in which the student is performing or in which he/she is assisting.
8. _____Failure to provide gonadal shielding to all patients.
9. _____Failure to question pregnancy on females 12-55 years of age
10. _____Failure to report for scheduled clinical time (e.g. make-up time)

DEMERIT* – Five Percentage Points Subtracted from Final Clinical Grade for each Occurrence.

1. _____Repeating radiographs without a technologist in the room
2. _____Failure to follow the direct/Indirect supervision policy
3. _____Passing radiographs without technologist approval
4. _____Failure to verify orders which results in performing the wrong exam or performing a non-ordered exam.

*Subject to Change

Remarks_____

_____

_____

I HAVE READ THIS REPORT

_____ _____ _____
Student's Signature | Clinical Instructor's Signature | Date

_____ _____
Clinical Coordinator (as needed) | Date

RAD-044 (01/09)

Clinical Demerits

A demerit is a numerical documentation of unsatisfactory performance, which will affect a student's overall clinical grade. The clinical instructors or program officials assign demerits. The number of demerits given will depend on the seriousness of the infraction or the frequency. Demerits will reduce the final clinical grade for the semester in which it is given.

NOTE

It is possible for a student to fail clinical due to an over abundance of demerits, but only after specific counseling methods have been exhausted (Coordinator decision). A student with a low clinical grade (i.e. 85-89 percent) should be even more careful not to perform any act that would require the issuing of a demerit.

Issuing a Demerit

A <u>one-point demerit</u> will be given for*:

- Tardiness- Recorded clinical time later than the scheduled start time. One minute passed the scheduled start time is considered tardiness and leaving early one minute or more prior to the scheduled end of shift is considered a left early. Two accounts of tardiness/left early are allowed per full semester (one per short, summer semester) after which each subsequent tardy will result in 1 demerit.
- Not properly calling in when absent from the clinic.
- Unexcused absences before or after a holiday or college break.
- Restricting or impeding clinical output, misuse of clinical time.
- Violation of the dress code (zero tolerance)
- Improper storage of the radiation monitoring device (Film badge) or taking the monitor home.
- Not having lead ID markers in the clinic area.
- Using another person's lead ID markers.
- Not properly utilizing the recommended SID
- Failure to properly put correct marker on exam (mislabeling, no portable stickers, no time indicators etc.)
- Not properly documenting/entering appropriate data in the computer or on the requisition.
- Improper use of radiation protection devices & procedures
- Failure to have 6-7 weekly PDA's completed by a full semester's end

A <u>two-point demerit</u> will be given for*:

- Not following professional standards.
- Inconsiderate treatment of patients, visitors, students, or hospital employees.
- Engaging in disorderly conduct that could ultimately threaten the well being of any patient, visitor, student, or hospital employee.
- Insubordination – refusing to follow orders or direction, arguing with supervisor.
- More than two absences in a full semester or one in a mini-semester.
- Leaving the clinic without permission from a program official.
- Failure to complete a radiographic examination that the student is performing or in which he/she is assisting.
- Failure to provide gonadal shielding to all patients.
- Failure to question pregnancy on females 12-55 years of age.
- Failure to report for scheduled clinical time (e.g. make-up time)

A <u>five-point demerit</u> will be given for*:

- Repeating radiographs without a technologist in the room.
- Not following the direct/indirect supervision policy.
- Passing radiographs without approval from a technologist.
- Failure to verify orders which results in performing the wrong exam or performing a non-ordered exam.

*Subject to change.

Radiologic Technology Program
Student Incident Report – Group I

Student _____

Clinical Facility _____Date _____

1. ☐ Obtaining, possessing, selling or using marijuana, narcotics, amphetamines, hallucinogenic substances, or alcohol on hospital premises.
2. ☐ Theft, abuse, misuse, or destruction of the property or equipment of any patient, visitor, student, hospital employee, or hospital.
3. ☐ Disclosing confidential information about any patient, student, or hospital employee without proper authorization.
4. ☐ Immoral, indecent, illegal, or unethical conduct on hospital premises.
5. ☐ Possession of weapons, wielding or threatening to use firearms, illegal knives, etc., on hospital premises.
6. ☐ Assault on any patient, visitor, student, hospital or college personnel.
7. ☐ Misuse or falsification of patient, student, hospital or college official records.
8. ☐ Removal of patient, student, hospital or college official records without proper authorization.
9. ☐ Reporting to clinical station under the influence of any substance in #1.

Group I Offenses Require Discharge From The Program

Remarks

_____

_____

I HAVE READ THIS REPORT

_____ _____
Student Signature Date

_____ _____
Clinical Instructor's Signature Date

_____ _____
Clinical Coordinator's Signature Date

RAD-045 (07/2018)

Radiologic Technology Program
Student Counseling Report

Name: _____ Date: _____

Subject: _____

Student Response:

_____ _____
Student's Signature Date

_____ _____
Instructor Signature (if applicable) Date

_____ _____
Clinical Coordinator (if applicable) Date

PROFESSIONALISM CONCERNS REPORT FORM

Radiologic Technology Program

STUDENT NAME	COURSE NAME
NAME OF COURSE INSTRUCTOR/PROGRAM DIRECTOR	DATE OF INCIDENT (if applicable)
SIGNATURE OF COURSE INSTRUCTOR/ PROGRAM OFFICIAL	DATE DISCUSSED WITH STUDENT

This report is prepared when a student exhibits behavior(s) not consistent with the guidelines set by the Radiologic Technology Program. It is intended to assist the student in meeting program expectations in academic, professional and/or administrative settings. Improvement in the area(s) noted below is needed in order to meet the standards of professionalism inherent in being a Radiologic Technologist.

Check the appropriate categories. Comments are required.

Patient-Centered Care

- ☐ The student did not act in the best interest of the patient.
- ☐ The student did not demonstrate sensitivity to the needs, values or perspectives of patient, family members and/or caregivers.
- ☐ The student did not establish appropriate rapport with the patient, family members and/or caregivers.
- ☐ The student did not demonstrate openness, responsiveness to the patient's ethnic and/or cultural background.
- ☐ The student did not respond to patients' need in a timely, safe and/or effective manner.
- ☐ Other unprofessional behavior related to professional patient centered care.

Comments: Describe the specifics of the incident (who, what, when & where)

Respect

- ☐ The student did not demonstrate respect for the rights of others in academic or professional settings.
- ☐ The student did not demonstrate respect in interaction with others.
- ☐ The student did not establish or maintain appropriate boundaries with patients, family members, fellow students, faculty or staff.
- ☐ Regardless of his/her intent and based on the recipient's response, the student did not demonstrate respect for all persons, regardless of race, gender, religion, sexual orientation, age, disability, gender identity, genetic identity, ethnicity, or socioeconomic status.
- ☐ The student did not demonstrate respect for the confidentiality of the rights of patient or others.
- ☐ Other behavior that demonstrated lack of respect.

Comments: Describe the specifics of the incident (who, what, when & where)

Integrity

- ☐ The student provided false or incomplete information in an academic, professional or administrative setting.
- ☐ The student acted outside the scope of his/her role in an academic, professional or administrative setting.
- ☐ The student presented the work of others as their own work.
- ☐ The student used his/her position for personal or professional advantage.
- ☐ The student used the physical or intellectual property of others without permission or attribution.
- ☐ Other behavior that demonstrated lack of integrity.

Comments: Describe the specifics of the incident (who, when, where, what)

Service

- ☐ The student did not function collaboratively within the health care team.
- ☐ The student did not demonstrate sensitivity to the requests of the healthcare team.
- ☐ The student did not demonstrate the ability to collaborate with fellow students, faculty, and all staff in the learning environment.
- ☐ Other behavior that impeded collaboration.

Comments: Describe the specifics of the incident (who, what, when & where)

Responsibility

- ☐ The student was unprepared, tardy, absent and/or missed deadlines/appointments.
- ☐ The student was disruptive or rude.
- ☐ The student needed continual reminders in the fulfillment of responsibilities.
- ☐ The student did not accept responsibility for his/her actions, recommendations or errors.
- ☐ The student could not be relied upon to complete his/her responsibilities in a timely manner.
- ☐ The student did not adhere to college and clinical policies, procedures, and/or instructions.
- ☐ The student did not dress in attire appropriate for a patient care setting.
- ☐ Other irresponsible/ unprofessional behavior(s).

Comments: Describe the specifics of the incident (who, what, when & where)

Responsiveness and Adaptability

- ☐ The student was resistant or defensive when provided with constructive feedback.
- ☐ The student did not demonstrate awareness of his /her own limitations and/or was unwilling to seek help when appropriate.
- ☐ The student resisted adopting recommendations from instructors or others to improve learning or performance.
- ☐ The student did not demonstrate adaptability in a patient care or classroom environment.
- ☐ Other behavior that impeded reliability, adaptability or self-improvement.

Comments: Describe the specifics of the incident (who, what, when & where)

Instructor/Program Director recommendation(s) and/or requirement(s) for remedying the professional concerns listed in this report. Additional documentation may be attached.

This section is to be completed by the student. Student comments can be attached separately, but must be submitted within one business day of the discussion with the course instructor/Program Director.

I have read this evaluation and discussed it with the Course Instructor/Program Director.

Your signature indicates that you have read the report and it has been discussed with you. It does not represent your agreement or disagreement with this Professionalism Concerns Report. If you disagree or want to comment, you are encouraged to comment in the space provided above and on the back of this form if necessary within one business day.

_____ _____

Student Signature Date

_____ _____

Instructor/Program Official Date

_____

Print Name and Title of program official

Appendix B

ARRT Standards of Ethics

https://www.arrt.org/docs/default-source/Governing-Documents/arrt-standards-of-ethics.pdf?sfvrsn=10