SANTA ROSA JUNIOR COLLEGE

Radiologic Technology Program

"Clinical Orientation for Students"
August 29, 2022

Christine McLarty, BA, RT(R)(CT),ARRT, CRT, RTF

Faculty & Lead Clinical Coordinator

…to "Everything Clinical 101"

Purpose of complete orientation:

- Go through all clinical processes:

    - Clinical Competency Handbook
    - Clinical policies
    - Forms
    - Resources…

As Resources for You…

- This PowerPoint is posted on the RT Program's Website at https://radtech.santarosa.edu

- REVIEW IT OFTEN!

- Put the "Clinical Experience Procedures" handout in the FRONT pocket of your clinical binder for reference.

Your Clinical Coordinators

Christine McLarty
Paul Olszewski
Bonnie Patterson
Joanne Robertson

Clinical Coordinators: (SRJC Faculty)

We are always willing to help you!!

- Christine McLarty

- Paul Olszewski

- Bonnie Patterson

- Joanne Robertson

SRJC Current Policy re: COVID-19 exposure for students as of 10/1/2021

- All students must comply with the State of California mandate to be fully vaccinated against COVID-19.

- To reduce student exposure to COVID-19 students must always wear an N-95 mask and face shield in the Emergency Department.

- Students may not participate in any Chest X-Ray in the Emergency Department unless the patient has been confirmed COVID negative.

- Students may not participate in any exam that involves a COVID -19 positive patient or PUI until a negative test has been confirmed.

This policy may be revised, as necessary.

Student Clinical Assignments

- Assignments are distributed by email...

- Sent out ~4 weeks prior to the beginning of a rotation...

- Students do not get to choose or request a clinical site.

- Students will be assigned clinical sites that are far away from their hometown – up to 100 miles.

Student Clinical Assignments…

- Four rotations within 2 years
- SIX clinical courses
- The email you will receive also includes:
  - ❖The name and contact information for your Clinical Instructor(s) and your Clinical Coordinator
  - ❖Clinical hours and days of week
  - ❖Dates of attendance
  - ❖Class days and hours
  - ❖Due dates for evaluations, attendance records, etc.
  - ❖Last page(s) show instructions to students…

!!! PRINT AND KEEP THIS EMAIL !!!

Definitions:

- Lead Clinical Instructor (LCI):

  - Your supervisor(s) at the clinical site
  - Special training in supervision and evaluation of students
  - Approved by the JRCERT
  - Can evaluate you for competency check-offs
  - Provide guidance and remediation
  - Does the clinical grading at end of semester
  - Signs off on your attendance record each month
  - Is the main point of contact at your clinical site
  - Is your main advocate & teacher.

Definitions:

- Additional Clinical Instructor (ACI):

  - RTs who support your LCI when LCI is not available
  - Has special training to assist the Lead CIs
  - Also approved by the JRCERT
  - Are also able to "check-off" on your mandatory/elective competency exams
  - They do not do your grading.

Definitions:

- Clinical Coordinator (CC):

    - CC is a *visiting* college faculty at your clinical site
    - CC is your main contact person for the college
    - CC is your advocate
    - CC is your teacher
    - CC is the "instructor of record" for clinical courses.

    Your CC will contact you by email to set up regular appointments.

Lead Clinical Instructor (LCI)

- Compensation for overseeing students?
  ### NONE!

- Their roles:

  Mentor/Teacher

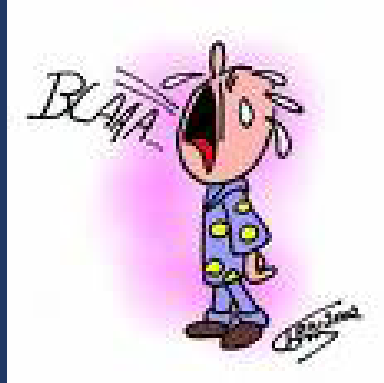 Evaluators

  Supervisors

  Liaison between students and staff

- Why are they not always available?

- This is why there are "Additional CIs."

Communicate with the Lead CI

- Set up your clinical orientation appointment in advance and bring your Pre-Rotation form

- Call if you are going to be late or absent

- The LCI is your mentor and advocate

- AND YOUR EVALUATOR!

- Grade will be adversely affected if student does not follow school policies

- "Accountability" section on the final Clinical Evaluation Form.

Dress Code

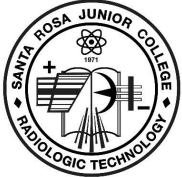Full Dress Code can be found on SRJC Rad Tech website.

- UNIFORMS Class of 2024: Uniforms will be purchased at a local uniform shop and be embroidered with the SRJC logo.

- LAB COAT: If student is wearing hospital OR scrubs outside of the OR they must wear their SRJC Lab coat with embroidered logo.

- NAILS: Based on CDC and WHO guidelines, no acrylic, gel or artificial nails allowed.

- EYELASHES: To ensure effective infection control and patient safety, false eyelashes or similar products may not be worn in skills labs or clinical agencies.

- TATOOS: If visible, tattoos should be covered while in class or lab. Students will follow clinical facility policy regarding tattoos.

This dress code applies to on-campus classes/labs and clinical sites. It will be enforced by your Lead Clinical Instructors. If you do not comply it will be noted on your Bi-weekly Progress Reports and Final Clinical Evaluation.

Student Orientation…an important "first step…"

- Schedule for the week prior or on first day.

- Have the LCI sign the verification form from the front pages of the *Clinical Competency Handbook*. Also on Rad Tech website.

Link reads: *Orientation Verification Form*

Santa Rosa Junior College
Radiologic Technology Program

Student Orientation to Clinical Facilities

All students **must** be oriented to the clinical education center where clinical experience is provided and to specialized areas such as Surgery, Emergency Department, Intensive Care and Pediatrics. It is the responsibility of the clinical instructor to provide this orientation either personally or by arrangement. In addition to orientation to the department policies and procedures, orientation will include fundamental operating instructions of the x-ray rooms, fluoroscopy rooms, C-arms and mobile equipment commonly used by students.

Students **must** call to schedule an orientation session **prior** to beginning a new clinical assignment. Please see the reverse side for orientation requirements.

Clinical Instructor: At completion of this orientation, please sign & keep a copy for your records.

Student: Keep a copy of this form and submit a copy to the program director.

_____
Clinical Site

_____
Clinical Instructor Signature   Date

_____
Student Signature   Date

Room or equipment number	Orientation complete	Comments

Submit the signed original to college officials

Orientation will include the following, as applicable:

1. **Parking Regulations:** location, permits, day/evening.
2. **Break/Lunch Procedures:** time and duration of meal and breaks and provisions for students bringing lunch.
3. **Restroom Facilities:** locations.
4. **Personal Storage Areas:** locker facilities and/or proper location for books, coats, bags, dosimeters, and valuables.
5. **Safety Procedures:** site's radiation protection plan, fire regulations, codes, security, disaster plan, infection control guidelines, and standard precautions.
6. **Notification Procedure:** in case of absence or tardiness, reporting incidents.
7. **Typical operation of department R&F rooms, mobile units & C-arms** Documented on front page. Common names for rooms OK i.e. Room 1, Portable 3.
8. **Ancillary Equipment and Supplies:** location of grids, contrast media, immobilization devices, protective aprons/devices, emergency cart, linens.
9. **Accessory Items:** needles, syringes, tourniquets, I.V. tubing, emesis basins, bandaging material, gloves, oxygen and suction accessories.
10. **Introduction to Key Personnel:** radiologist(s), administrative personnel, staff technologists, and ancillary staff.
11. **Student Assignments and Information:** postings, posted student schedule, reject images for analysis, weekend /evening policy, assignments and expectations.
12. **Orientation to Department:** routines, patient transportation, procedure manual, equipment operation, exam requisitions.
13. **Department Radiation Protection Plan:** reports, violation, reporting hierarchy.
14. **Communications During Clinical Assignment:** emergency contact, outside phone calls, use of cell phone, visiting patients, contacting other students.
15. **Hospital Information:** history, bed capacity, HIPAA program.
16. **Hospital Tour:** OR, ICU, CCU, orthopedic clinic, women's center, and other ancillary departments, etc…
17. **PACS / RIS:** student access code and privileges.
18. **Positioning protocol book or resource:** All body parts and fluoroscopy exams.

Submit the signed original to college officials

REMEMBER!

- Students are expected to contact the LEAD Clinical Instructor to set up an orientation
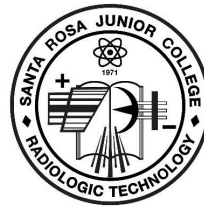- As soon as you receive your rotation assignment.

Student Orientation to Clinical Facilities

Submit this form….

AFTER YOUR ORIENTATION SESSION

Form is found online in "Resources for Students" section of RT Webpages.

Link is called "Orientation Verification Form."

Santa Rosa Junior College
Radiologic Technology Program

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Student: Keep a copy of this form and submit a copy to the program director.

Clinical Site
_____

Clinical Instructor Signature   Date
_____

Student Signature   Date

Room or equipment number	Orientation complete	Comments

Submit the signed original to college officials

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Pre-Rotation Form

Submit this form during your initial meeting with the LCI:

1. **Assists the LCI and staff in knowing what level of training you have.**

2. **Helps to establish objectives for the semester.**

Santa Rosa Junior College
Radiologic Technology Program

PRE-ROTATION FORM

Fill out this form and submit to your new clinical instructor before your orientation session.

Student's Name:_____

1. How long have you been in the Radiology program?

2. Where were your previous rotations and how long at each place?

3. Which positioning skills have you had up to this point?

4. Which positioning skills will you have had by the end of this rotation?

5. Which procedures do you feel comfortable performing?

6. What competencies do you need to be checked off during this rotation?

Student Role in Educating the "Trainers"

- How can you help the staff members to recognize your <u>level</u> of training?

- How can you communicate which exams you need to complete?

- How can you get the staff to <u>accurately</u> fill out Bi-Weekly Progress Reports?.

When can I feel like a real "tech"??

- **Not right away**

- **Start with a good dose of observation**

- **Many steps to get there**

What are the steps in the student learning process before working more independently?

- Campus:
  - Didactic instruction--lectures
  - Pass the exams on lecture materials
  - Lab demonstration and practice
  - Lab skills evaluation (check-off)

- Clinical site:
  - Clinical observation
  - Performance of skill with direct supervision
  - Competency evaluation
  - Performance of skill with indirect supervision*

*ALL REPEATS ARE PERFORMED UNDER DIRECT SUPERVISION

Can you do "hands-on" yet?...

1. Observe several times at the Clinical Site.
2. Practice "hands-on" under Direct Supervision at the Clinical Site.
3. You may not make an exposure until you have been taught the exam and passed the competency at school.

Remember!!

- You may <u>not</u> perform exams with indirect supervision in the clinical site until you have completed the instructional steps on campus!!

- AND until you have completed a successful competency check-off in the clinical site
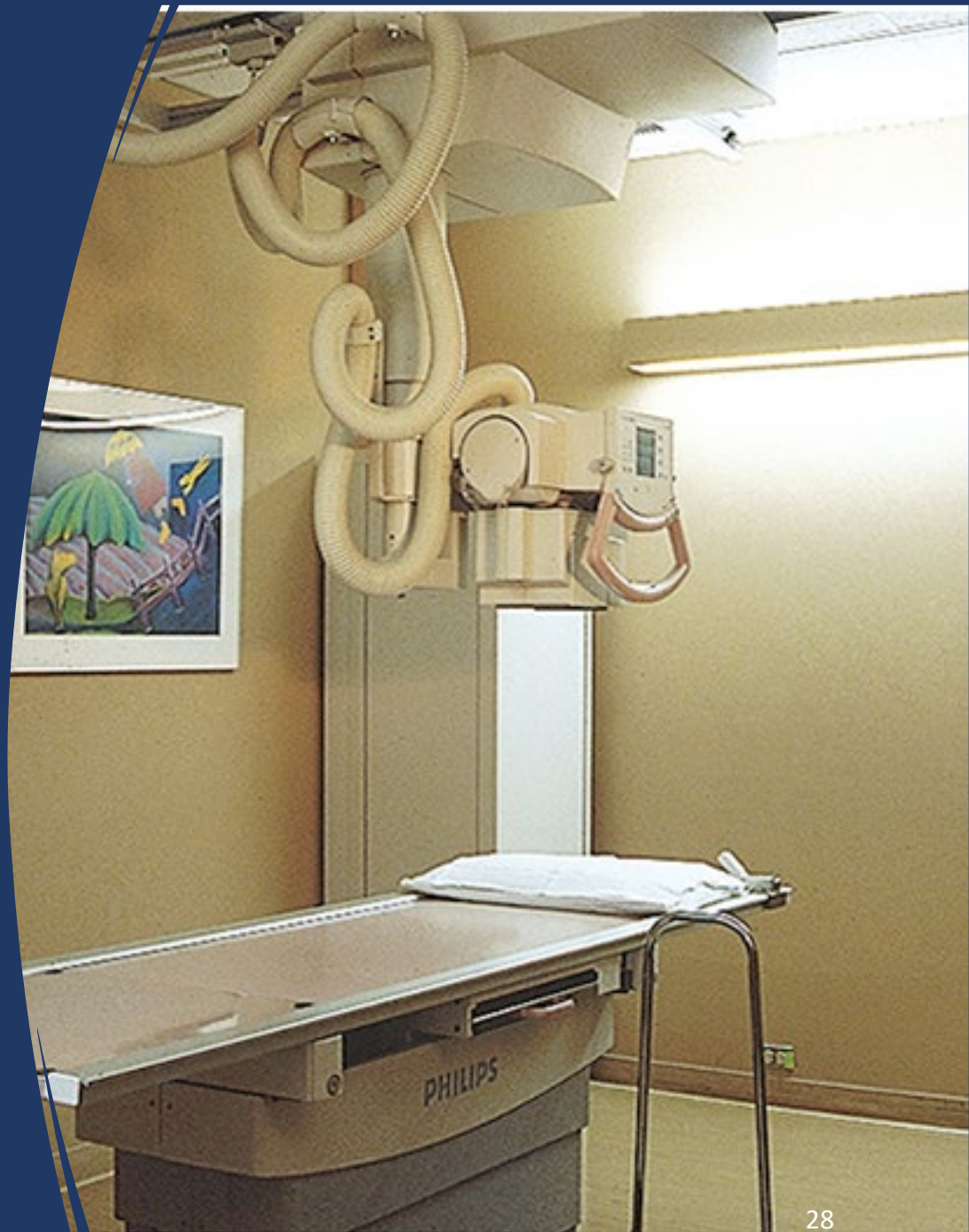

What do you do when an RT asks you to do an exam, when you haven't been through all the appropriate steps????.

Personal Liability
Discussion

Direct Supervision:

- The Radiologic Technologist (RT) is <u>in the room</u> with the student and is observing all activities

- When RT feels confident in your knowledge, then you can position with <u>direct</u> supervision.

AFTER you achieve a Clinical Competency Check-Off...

- THEN...you can go to indirect supervision (there are some exceptions that we will discuss...)

Before Indirect Supervision…

- You have been taught the exam in Positioning Class.

- You have passed the Competency in Positioning Lab at school.

- You request that a Clinical Instructor watch you do the exam from start to finish.

- They must approve (check-off) your Clinical Competency on that exam and document that in your handbook.
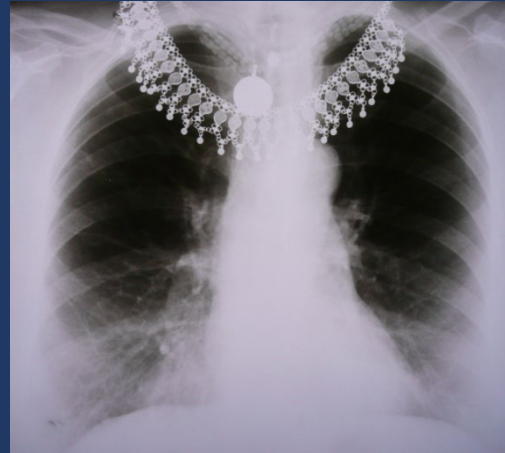
Indirect Supervision

- R.T. evaluates requisition to see if patient and exam are appropriate for the student
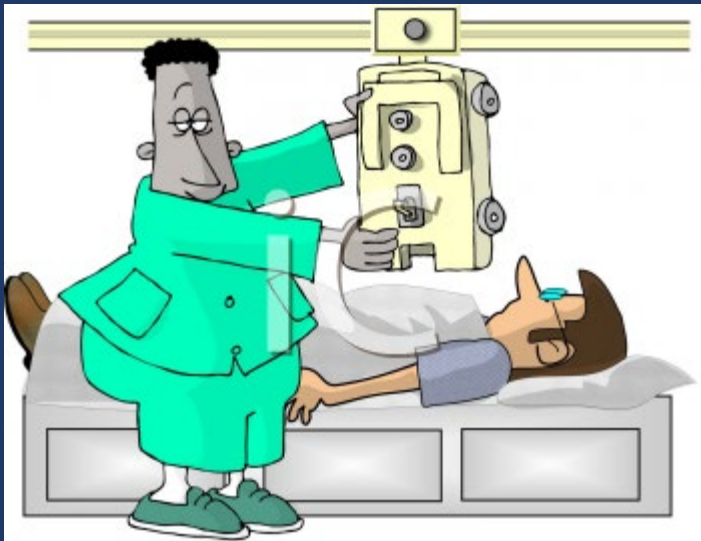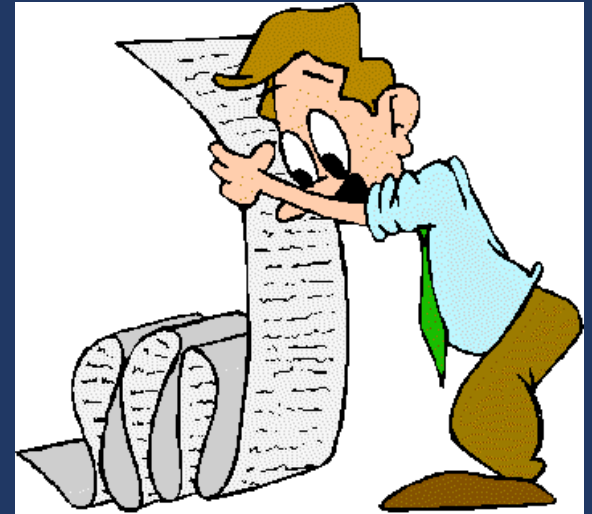
- Student performs exam within "calling distance" of an R.T. (means in adjacent room)...
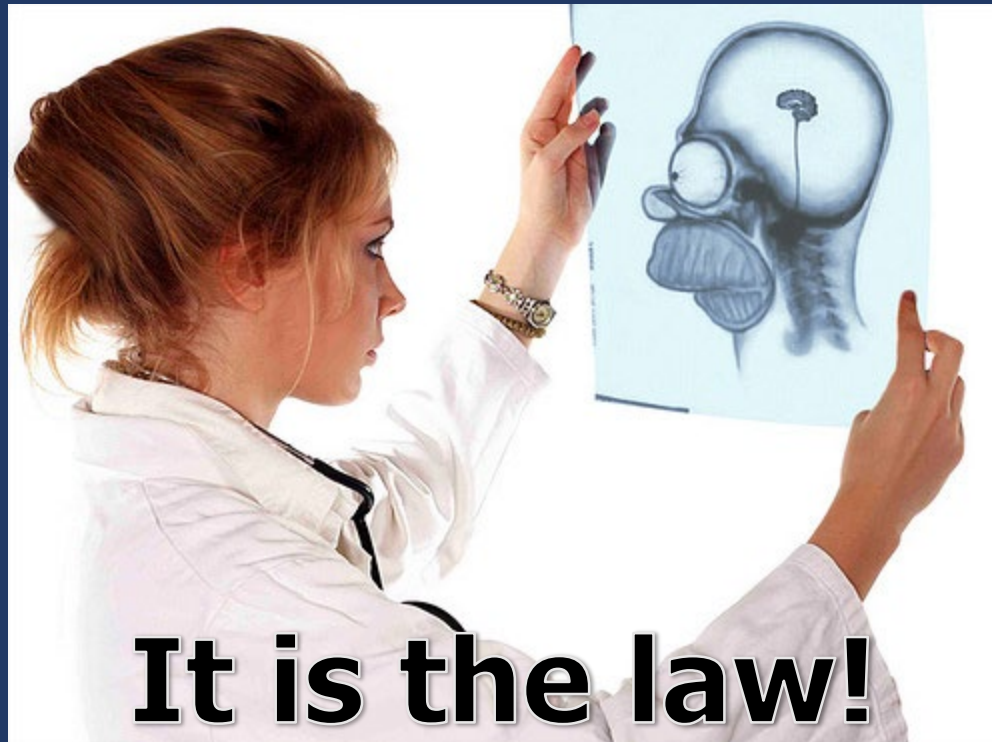
Indirect Supervision

- RT evaluates images and decides outcome

- All repeats are ALWAYS done under direct supervision!!!

REPEATS

All repeat exposures MUST be done with direct supervision regardless of student's level of training!!!.

It is the law!

Other Exceptions to Indirect Supervision

- **Direct supervision prevails:**

- If patient or personnel *safety* is in question

- During *ALL REPEATS*

- In all *remote locations*, such as in the OR, CT, ED, angiographic facilities, portables, and fluoroscopy, to name a few.

- *Pediatric* cases (anyone under the age of 18).

The ARRT   (See ARRT.org)

- HOMEWORK: Go to the Website and become familiar with all areas.

- ARRT will give your "Registry Exam" for certification at the end of your two years.

The ARRT   (See ARRT.org)

- No, really…go to the Website and become familiar NOW!

- STUDENT is responsible to make sure that all eligibility requirements are completed!

The ARRT

- American Registry of Radiologic Technologists (National agency for RTs)
    - Radiographer certification exam can be in July 2024 for you!!!
- Once you pass "The Registry," then apply for State of CA certification
- YOU **MUST** HAVE STATE CERTIFICATION TO WORK AS A RADIOGRAPHER IN CA!!.

ARRT Eligibility

The American Registry of Radiologic Technologists®

- Educational
- Moral/Ethical/Legal (pre-approval process)
- Competency requirements…

"Competencies"

- Complete list is defined by the ARRT

- Minimum number is required for ARRT eligibility

- Complete by end training
  - Mandatory: ALL 36 exams needed
  - Electives: Need 15 of 34 exams listed
  - Other: 10 patient-care activities completed in campus labs.

SRJC Radiologic Technology Clinical Competency Documentation
Imaging Procedures ~ 36 Mandatory & 15 Elective Required /10 Simulations Allowed
(> = Eligible for Simulation)
(* = Trauma requires modifications in positioning due to injury with monitoring of the patient's condition.)

Student Name: _____

Chest and Thorax			1. Date completed	2. Date re-check	Pt. or Simulate	Competency Verified by:	
Chest Routine	M					1	2
Chest AP (w/c or stretcher)	M					1	2
Ribs	M>					1	2
Chest Lateral Decubitus		E>				1	2
Sternum		E>				1	2
Upper Airway (Soft Tissue Neck)		E>				1	2
Sternoclavicular (SC) Joints		E>				1	2
Upper Extremity							
Thumb or Finger	M>					1	2
Hand	M					1	2
Wrist	M					1	2
Forearm	M					1	2
Elbow	M					1	2
Humerus	M>					1	2
Shoulder	M					1	2
Clavicle	M>					1	2
Scapula		E>				1	2
A-C joints		E>				1	2
Trauma: Shoulder or Humerus (Scapular Y, Transthoracic or Axial)*	M					1	2
Trauma Upper Extremity,(Non -Shoulder)*	M					1	2
Lower Extremity							
Toes		E>				1	2
Foot	M					1	2
Ankle	M					1	2
Knee	M					1	2
Tibia-Fibula	M>					1	2
Femur	M>					1	2
Trauma: Lower Extremity*	M					1	2
Patella		E>				1	2
Calcaneus (Os Calcis)		E>				1	2
Trauma: Lower Extremity*	M					1	2
Head – Must select at least one least one elective procedure from this section.							
Skull		E>				1	2
Facial Bones		E>				1	2
Mandible		E>				1	2
Temporomandibular Joints (TMJ's)		E>				1	2
Nasal Bones		E>				1	2
Orbits		E>				1	2
Paranasal Sinuses		E>				1	2
Spine and Pelvis							
Cervical Spine	M					1	2
Thoracic Spine	M>					1	2
Lumbosacral Spine	M					1	2
Cross-Table (Horizontal Beam) Lateral Spine (Patient Recumbent)	M>					1	2

"Competencies" (cont'd)

- More about 15 electives:

  - 1 from head section
  - 2 from fluoroscopic studies

- See patient care competencies on form. ➡

SRJC Radiologic Technology Clinical Competency Documentation
Imaging Procedures ~ 36 Mandatory & 15 Elective Required /10 Simulations Allowed
(> = Eligible for Simulation)
(* = Trauma requires modifications in positioning due to injury with monitoring of the patient's condition.)

Student Name: _____

Spine and Pelvis		1. Date completed	2. Date re-check	Pt. or Simulate	Competency Verified by:	
Pelvis	M				1	2
Hip	M				1	2
Cross-Table (Horizontal Beam) Lateral Hip (Patient Recumbent)	M>				1	2
Sacrum and/or Coccyx	E>				1	2
Scoliosis Series	E>				1	2
Sacroiliac Joints	E>				1	2
Abdomen						
Abdomen Supine	M				1	2
Abdomen Upright	E>				1	2
Abdomen Decubitus	E>				1	2
Intravenous Urography	E				1	2
Fluoroscopy Studies – Must select two procedures from this section and perform per site protocol.						
UGI Series, Single or Double Contrast	E				1	2
Contrast Enema, Single or Double Contrast	E				1	2
Small Bowel Series	E				1	2
Esophagus(NOT Swallowing Dysfunction Study)	E				1	2
Cystography / Cystourethrography	E				1	2
ERCP	E				1	2
Myelography	E				1	2
Arthrography	E				1	2
Hysterosalpingography	E				1	2
Mobile C-Arm Studies						
C-Arm Procedure (Requiring Manipulation to Obtain More Than One Projection)	M>				1	2
Surgical C-Arm Procedure (Requiring Manipulation Around a Sterile Field)	M>				1	2
Mobile Radiographic Studies						
Chest	M>				1	2
Abdomen	M				1	2
Upper or Lower Extremity	M				1	2
Pediatrics (Age 6 or Younger)						
Chest Routine	M>				1	2
Upper or Lower Extremity	E>				1	2
Abdomen	E>				1	2
Mobile Study	E>				1	2
Geriatric Patient (At Least 65 Years Old and Physically or Cognitively Impaired as a Result of Aging)						
Chest Routine	M					
Upper or Lower Extremity	M					
Hip or Spine	E					

Page 2 of 2

Please be careful…

- A minimum number of <u>competencies</u> <u>and hours</u> are required for course completion EACH grading period

- Default grade is "F" if minimum competencies and/or minimum number of clinical hours are not completed *<u>and submitted by the written due date</u>*

- Failure to complete required hours and/or competencies = failed course, and not able to continue in the program.

Process for Competency Evaluations (at the clinical site)

(AKA Competency Check-offs)

- Student initiates
- *CI observes exam
- CI either passes the student or not, based on <u>specific</u> criteria written on the form (Form on next slide…)
- CI SIGNATURE in the *Clinical Competency Handbook* in the appropriate area
- CI to also PRINT name legibly below…

Check-offs can ONLY be done by Lead CIs or Additional CIs.

Competency Check-Off Form

MANDATORY COMPETENCY EVALUATIONS

<u>Instructions</u>: The evaluator will mark each area according to the following scale: 3 = Acceptable
1 = Requires minor improvement
0 = Unacceptable

AREA OF EVALUATION:	CHEST ROUTINE	CHEST AP – W/C or STRETCHER	*RIBS*	*THUMB OR FINGER*	HAND	WRIST	FOREARM
Simulation or Patient ID #:							
DATE:							
Evaluation of Requisition							
Room Preparation							
Patient Care							
Use of equipment							
Positioning Skills							
Radiation Protection							
Exposure Index within limits							
IMAGES SHOW CORRECT: Anatomical Parts							
Anatomical Alignment							
EI and Technique							
Image Identification							
Collimation to area of interest							
EXAMINATION PASSED: (Evaluator's Signature)							

*Eligible for Simulation

More than two 1's constitutes a failed check-off.   A zero constitutes a failed check-off.
No image acquisition is performed without direct supervision of a registered technologist.

Each Semester Has Specific Competencies too…

Schedule of Competency Evaluations

Positioning Courses	Semester	Assigned Competencies
RADT 61A Chest, abdomen, upper & lower extremities, hips & pelvis	1st Fall	**3 Mandatory Competencies:** 2 V Routine Chest and Abdomen – Upright or Supine
RADT 61B Spine, ribs, UGI, BE, GU, contrast exams	1st Spring	**5 Mandatory Competencies:** Spine (any level) plus 4 other exams **3 Elective Competencies:** 1 Fluoroscopy study plus 2 other exams
RADT 61C Skull, facial bones, mandible, sinuses	1st Summer	**7 Mandatory Competencies** **3 Elective Competencies:** 1 elective from skull & facial bones 61C counts as an elective
Clinical Course	2nd Fall	**7 Mandatory Competencies:** 1 C-Arm Study + 6 other exams **3 Elective Competencies**
Clinical Course	2nd Spring	**9 Mandatory Competencies** **3 Elective Competencies:** 1 Fluoroscopy study plus 2 other exams
Clinical Course	2nd Summer	**5 Mandatory Competencies** **3 Elective Competencies**

At end of grading period, we record your totals here…

Mandatory & Elective Competence Evaluation Verification

Student's Name:	Patients Number Completed		Simulated Number Completed		Date	Clinical Coordinator's Comments and initials
	Mandatory	Elective	Mandatory	Elective		
Fall - M 3 2 V Routine Chest and Abdomen – Upright or Supine						
Spring - 5 M/3E Spine (any level) plus 4 other exams 1 Fluoroscopy study plus 2 other exams						
Summer - M7/E3 1 elective from skull & facial bones 61C counts as an elective						
Fall - M7/E3 1 C-Arm Study + 6 other exams						
Spring – M9/E3 1 Fluoroscopy study plus 2 other exams						
Summer M5/E3						

Injuries

- Incident Reports
- Worker's Compensation coverage
- Procedures

*Must be reported to campus Health Services and H.R. within 24 hours to be a covered claim!!!

Complete an INCIDENT REPORT found on this page.

https://shs.santarosa.edu/downloadable-forms

Reporting Inappropriate Behavior

- Sexual misconduct
- Mishandling of patients (radiation, physical treatment, ethical issues, breach of medical or surgical asepsis standards)
- Equipment hazards
- Bullying
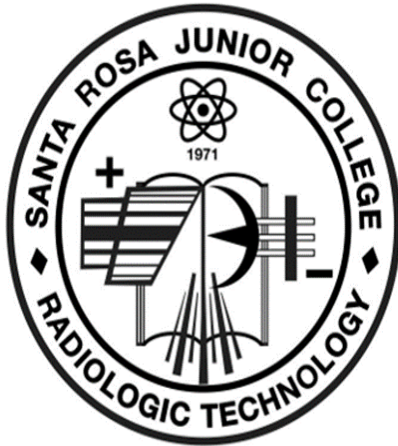- Suspicion of abuse of a patient (child abuse, elder abuse, etc.).

Forms! (Yuck!)

Where do you find them online?

http://radtech.santarosa.edu/

Check online soon to see what resources are there. Go to Radiologic Technology Program Webpage. IT IS PART OF YOUR ASSIGNMENT TO HELP PREPARE YOU BEFORE STARTING THE PROGRAM.

Radiologic Technology

Clinical Competency Handbook

Class of 2024

Homework

READ the Clinical Competency Handbook and all forms in "Student Resources" before the start of the fall semester.

https://radtech.santarosa.edu

TABLE OF CONTENTS

IMPORTANT!

- Keep your Clinical Competency Handbooks IN THE ORDER IN WHICH YOU PRINTED THEM OUT

- Do not rearrange the pages

- Submit them at the end of the grading period

- Your CCs use them to enter data into program records and then return them to you

- See document emailed to you in August: "2022 Clinical Experience Procedures."

Legal documentation:

- All documents submitted to the ARRT are legal documents.

- Do not use White-out or any type of correction tape!

- Do not use pencil!

ARRT may reject these documents.

ARRT Competency Requirements

4.2.1 General Patient Care Procedures

Candidates must be CPR/BLS certified and have demonstrated competence in the remaining nine patient care procedures listed below. The procedures should be performed on patients whenever possible, but simulation is acceptable if state regulations or institutional practice prohibits candidates from performing the procedures on patients.

General Patient Care Procedures	Date Completed	Competence Verified By
CPR/BLS Certified		
Vital Signs – Blood Pressure		
Vital Signs – Temperature		
Vital Signs – Pulse		
Vital Signs – Respiration		
Vital Signs – Pulse Oximetry		
Sterile and Medical Aseptic Technique		
Venipuncture*		
Assisted Patient Transfer (e.g., Slider Board, Mechanical Lift, Gait Belt)		
Care of Patient Medical Equipment (e.g., Oxygen Tank, IV Tubing)		

*Venipuncture can be simulated by demonstrating aseptic technique on another person, but then inserting the needle into an artificial forearm or suitable device.

4.2.2 Imaging Procedures

Institutional protocol will determine the positions and projections used for each procedure. When performing imaging procedures, the candidate must independently demonstrate appropriate:
- patient identity verification;
- examination order verification;
- patient assessment;
- room preparation;
- patient management;
- equipment operation;
- technique selection;
- patient positioning;
- radiation safety;
- image processing; and
- image evaluation.

4.2.2 Imaging Procedures (continued)

Imaging Procedures	Mandatory	Elective	Eligible for Simulation	Date Completed	Competence Verified By
Chest and Thorax					
Chest Routine	✓				
Chest AP (Wheelchair or Stretcher)	✓				
Ribs	✓		✓		
Chest Lateral Decubitus		✓	✓		
Sternum		✓	✓		
Upper Airway (Soft-Tissue Neck)		✓	✓		
Sternoclavicular Joints		✓	✓		
Upper Extremity					
Thumb or Finger	✓		✓		
Hand	✓				
Wrist	✓				
Forearm	✓				
Elbow	✓				
Humerus	✓		✓		
Shoulder	✓				
Clavicle	✓		✓		
Scapula		✓	✓		
AC Joints		✓	✓		
Trauma: Shoulder or Humerus (Scapular Y, Transthoracic or Axial)*	✓				
Trauma: Upper Extremity (Non-Shoulder)*	✓				
Lower Extremity					
Toes		✓	✓		
Foot	✓				
Ankle	✓				
Knee	✓				
Tibia-Fibula	✓		✓		
Femur	✓		✓		
Patella		✓	✓		
Calcaneus		✓	✓		
Trauma: Lower Extremity*	✓				

* Trauma requires modifications in positioning due to injury with monitoring of the patient's condition.

ARRT Competency Requirements

4.2.2 Imaging Procedures (continued)

Imaging Procedures	Mandatory or Elective		Eligible for Simulation	Date Completed	Competence Verified By
	Mandatory	Elective			
Head — Candidates must select at least one elective procedure from this section.					
Skull		✓	✓		
Facial Bones		✓	✓		
Mandible		✓	✓		
Temporomandibular Joints		✓	✓		
Nasal Bones		✓	✓		
Orbits		✓	✓		
Paranasal Sinuses		✓	✓		
Spine and Pelvis					
Cervical Spine	✓				
Thoracic Spine	✓		✓		
Lumbar Spine	✓				
Cross-Table (Horizontal Beam) Lateral Spine (Patient Recumbent)	✓		✓		
Pelvis	✓				
Hip	✓				
Cross-Table (Horizontal Beam) Lateral Hip (Patient Recumbent)	✓		✓		
Sacrum and/or Coccyx		✓	✓		
Scoliosis Series		✓	✓		
Sacroiliac Joints		✓	✓		
Abdomen					
Abdomen Supine	✓				
Abdomen Upright	✓		✓		
Abdomen Decubitus		✓	✓		
Intravenous Urography		✓			

4.2.2 Imaging Procedures (continued)

Imaging Procedures	Mandatory or Elective		Eligible for Simulation	Date Completed	Competence Verified By
	Mandatory	Elective			
Fluoroscopy Studies — Candidates must select two procedures from this section and perform per site protocol.					
Upper GI Series, Single or Double Contrast		✓			
Contrast Enema, Single or Double Contrast		✓			
Small Bowel Series		✓			
Esophagus (NOT Swallowing Dysfunction Study)		✓			
Cystography/Cystourethrography		✓			
ERCP		✓			
Myelography		✓			
Arthrography		✓			
Hysterosalpingography		✓			
Mobile C-Arm Studies					
C-Arm Procedure (Requiring Manipulation to Obtain More Than One Projection)	✓		✓		
Surgical C-Arm Procedure (Requiring Manipulation Around a Sterile Field)	✓		✓		
Mobile Radiographic Studies					
Chest	✓				
Abdomen	✓				
Upper or Lower Extremity	✓				
Pediatric Patient (Age 6 or Younger)					
Chest Routine	✓		✓		
Upper or Lower Extremity		✓	✓		
Abdomen		✓	✓		
Mobile Study		✓	✓		
Geriatric Patient (At Least 65 Years Old and Physically or Cognitively Impaired as a Result of Aging)					
Chest Routine	✓				
Upper or Lower Extremity	✓				
Hip or Spine		✓			
Subtotal					
Total Mandatory exams required	36				
Total Elective exams required		15			
Total number of simulations allowed			10		

MANDATORY COMPETENCY EVALUATIONS

Instructions: The evaluator will mark each area according to the following scale: 3 = Acceptable
1 = Requires minor improvement
0 = Unacceptable

AREA OF EVALUATION:	CHEST ROUTINE	CHEST AP – W/C or STRETCHER	*RIBS*	*THUMB OR FINGER*	HAND	WRIST	FOREARM
Simulation or Patient ID #:							
DATE:							
Evaluation of Requisition							
Room Preparation							
Patient Care							
Use of equipment							
Positioning Skills							
Radiation Protection							
Exposure Index within limits							
IMAGES SHOW CORRECT: Anatomical Parts							
Anatomical Alignment							
EI and Technique							
Image Identification							
Collimation to area of interest							
EXAMINATION PASSED: (Evaluator's Signature)							

*Eligible for Simulation

More than two 1's constitutes a failed check-off.   A zero constitutes a failed check-off.
No image acquisition is performed without direct supervision of a registered technologist.

Process for Competency Evaluations (at the clinical site)

(AKA Competency Check-offs)

- Student initiates

- *CI observes exam

- CI either passes the student or not, based on <u>specific</u> criteria written on the form (Form on next slide...)

- CI SIGNATURE in the *Clinical Competency Handbook* in the appropriate area

- CI to also PRINT name legibly below...

*Check-offs can ONLY be done
by Lead CIs or Additional CIs.

What is a simulated exam?

- 10 simulated check-offs are allowed.

- Only certain exams are eligible for simulation and are designated on the ARRT Competency Requirements.

Competency Rechecks….

WHAT???

Wasn't once enough?...

Competency Re-Checks

- Can be used once per exam to fulfill the minimum number of competencies for course requirements each semester

- You can do a mandatory or an elective <u>more than once</u> throughout the program if necessary to prove that your skills are up to date….there is not a limit.

Competency Re-Checks

- These pages can also be used when students need to improve skills on something already checked-off...

- CI identifies during image analysis

- Student is given specific number of weeks to remediate (go back to direct supervision!!)

- Student passes the "re-check" & is back to indirect supervision.

Competency Re-Check Form

RECHECK COMPETENCY EVALUATIONS

Instructions: The evaluator will mark each area according to the following scale:
3 = Acceptable   1 = Requires minor improvement   0 = Unacceptable

AREA OF EVALUATION:						
Patient ID #:						
DATE:						
Evaluation of Requisition						
Room Preparation						
Patient Care						
Use of equipment						
Positioning Skills						
Radiation Protection						
Exposure Index within limits						
IMAGES SHOW CORRECT: Anatomical Parts						
Anatomical Alignment						
EI and Technique						
Image Identification						
Collimation to area of interest						
EXAMINATION PASSED: (Evaluator's Signature)						

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More than two 1's constitutes a failed check-off.   A zero constitutes a failed check-off.
No image acquisition is performed without the direct supervision of a registered technologist.

Clinical Coordinator Visits

- What is a Clinical Coordinator?
- What are the purposes of a clinical visit?
- What happens during a clinical visit?
- *THIS IS A CLASS…BE ON TIME.*

Procedures Around Establishing Appointment Times

- CC will contact you to set up on-site visit

- Most communication will be by email.

- Check your emails daily! You will not get a reminder!

Computed Tomography

CT Rotations

- Students will have a 2 week rotation in CT during the first semester of their second year.

- Rotation may take place at their assigned clinical site or elsewhere if CT is not available at their site.

- Also, during that semester students will be provided with CT learning modules to supplement the rotation.

- Upon completion – students will have the CT Orientation Checklist signed by a Clinical Instructor and turn in school.

Student Name: _____ **Date:** _____

Clinical Education Center: _____

YES	NO	
		1. Student shows appropriate skills & care in transporting patients, attending to patients' needs, handling IV's & catheters.
		2. Cooperates well with staff and projects professionalism at all times.
		3. Applies didactic knowledge and critical thinking in performance.
		4. Demonstrates enthusiasm and interest in learning.
		5. Is punctual reporting to this assignment in the morning and after break.
		6. Reports to assignment in proper uniform including ID baddge and dosimeter

1. **Student has basic knowledge of the most common examinations**:	Completed	N/A
A. **Head/Face** - Brain, IAC, Facial bones, Orbits, Sinuses, COW.		
B. **Spine (Cervical)** -. Carotid angio, cervical trauma.		
C. **Chest** – Heart, Aorta, Mediastinum, Lungs, Hi-Res chest.		
D. **Abdomen/Pelvis** - Liver & spleen, pancreas, retroperitoneal, renal, adrenals, general survey for mass or abscess, bladder.		
E. **Spine (T&L)** - Spinal stenosis, spinal trauma reconstructions.		
F. **Special Studies** - Post myelogram, biopsy, 3D reconstruction, MIPS, Orthopedic and spinal image guided surgery workup, cardiac scoring.		

	Completed	N/A
2. Examination preparation, patient care, and vital signs.		
3. Use of contrast agents (contraindications and adverse reactions).		
4. I.V. and power injector before and during scans.		
5. Basic knowledge of the scanner, accessory equipment and software.		
6. Knowledge of image processing and archiving.		
7. Imaging protocols and image management.		
8. Knowledge and observance of radiation safety protocols.		

Supervising RT Signature and Comments:

66

*Surgery /*Operating Room

- Complete the C-Arm Orientation checklist and turn it in to school.

Santa Rosa Junior College
Radiologic Technology Program

C-Arm Orientation Checklist

Student Name:	Semester:

Locate and/or operate	completed	N/A
- Brakes and steering mechanisms.		
- Connect C-Arm unit to monitors.		
- ON/OFF switch/button.		
- Exposure technique control buttons/knobs.		
- Low dose and boost control.		
- Contrast and brightness control on monitor.		
- Collimation control.		
- Image orientation control.		
- Fluoro timer reset.		
- Movement control levers/handles.		
- Image save/store buttons.		
- Exposure switches (hand, foot), controls.		
- Hard copy devices.		
- Data entry using keyboard.		
- Annotate data before and after procedure.		
- Storage location.		
- Send images to PACS		
Radiation Protection		
- Understands how surgical cases are ordered.		
- Only expose when ordered by the physician.		
- Make sure all personnel are wearing protective aprons.		
Advanced Procedures (if applicable)		
- Cine radiography		
- Road mapping		
- Image subtraction		
- Peak opacification		
- Storing of images and cine		
Comments:		
Evaluating R.T. _____ Date: _____		

Use of portables and fluoroscopy-

- Part of your training at available sites.
- State of California requires 40 hours of fluoro experience.
- All portables and fluoroscopy exams are under direct supervision only!

More Forms…

- Bi-Weekly Progress Report
  - What is the purpose?
  - Who can fill them out?
    - ANY OF THE RTs THAT YOU WORK WITH
  - How often must I have one filled out?
  - Can I be selective about which ones I submit to the CI?
  - WHERE are they kept?...

"Bi-Weekly" Indicates Every Two Weeks

Bi-Weekly Progress Report correlates with:

- **Course objectives**
- **Clinical Evaluation Form**

- **SAME 10 CATEGORIES**

Bi-Weekly Progress report for:	Clinical Site:		
Date:	***Please rate student based on level of training.***		
E = EXCEEDS EXPECTATION	**ME = MEETS EXPECTATION**	**NI = NEEDS IMPROVEMENT**	**F = FAILING**
PATIENT CARE - Correctly identifies patient modesty, confidentiality. Safely transfers patients, properly handles patient devices.			
COMMUNICATION: Practices proper "hand-off" procedures, understanding of instruction, direction, requisitions, and all interactions essential to clinical performance. Consistently utilizes AIDET practices with patients and their families			
PROFESSIONALISM AND ETHICS: Upholds the ARRT Code of Ethics, shows professionalism under stress environment, cooperates with technologists and demonstrates a team approach, takes initiative and demonstrates judicious use of post-processing tools.			
EQUIPMENT HANDLING - Practice safe and respectful manipulation of all equipment, accurate use of digital equipment, consistently aligns XRAY tube and IR.			
POSITIONING SKILLS - Identifies anatomy, marks images correctly according to department standards, produces images of consistent high quality, and shows competency and proficiency with positioning at appropriate level of training.			
CRITICAL THINKING AND ADAPTABILITY - Identifies /corrects positioning and technique errors at appropriate level of training. Recognizes causes of artifacts, adapts to new and changing situations or patient needs. Adapts and improvises to non-routine situations: ER, OR, Trauma.			
ACCOUNTABILITY - Adheres to the college and department dress code, consistent compliance to punctuality and attendance. Compliance to programs and departments policies; to instructors' suggestions or recommendations. Remains alert and interested in the procedures – asks pertinent questions.			
RADIATION PROTECTION – Collimates to area of interest and in accordance with department protocols, uses shielding when possible; and selects technical factors according to ALARA. Maintains compliance of department protocol with women of childbearing age. Monitors exposure index (EI) on the initial image to insure appropriate radiation delivery to the patient. Alters technical factors on subsequent images as necessary to minimize radiation exposure whenever possible.			
ORGANIZATION - Plans, anticipates needs, room and equipment readiness. Demonstrates an organized and efficient work pattern during exams. Work at a pace appropriate for level of training. Demonstrates increase confidence and independence in executing tasks.			
SENSITIVITY/UNDERSTANDING – Shows empathy, tolerance and adaptation to the needs of patients and their families, and to co-workers and fellow students. Values differences. Is considerate and respectful.			
STUDENT CHALLENGE – (Student or technologist to define the goal.)			
Technologist Comments:			
Technologist Signature:	Technologist Print Name:		
Student Comments:			
Student Signature:	Date:		

Students: Keep a copy for your records. The original is kept by your clinical instructor until you graduate. REV 4/4/2019

Objectives for…Progress Reports AND Final Clinical Evaluation Form (CEF)

They are the same as the course objectives.

A) PATIENT CARE
- Maintains patient modesty, comfort & confidentiality.
- Behaves in a nonjudgmental, mature and compassionate manner to patients & their families.
- Properly handles patients and patient devices.
- Correctly identifies patient per department protocol.
- Uses a safe approach in transferring patients (must be fully supervised during first semester of training).

B) COMMUNICATION SKILLS
- Practices proper "hand-off" procedures.
- Shows understanding of instruction & direction.
- Reads and understands requisitions.
- Demonstrates clear and complete understanding of all interactions essential to clinical performance.
- Consistently utilizes AIDET practices when communicating with patients, their families, and caregivers.

C) PROFESSIONALISM & ETHICS:
- Upholds principles of the ARRT Code of Ethics.
- Projects professionalism under stress environment.
- Cooperates with technologists and demonstrates a team approach.
- Takes initiative and interest in their clinical education.
- Demonstrates judicious use of post-processing tools.

D) EQUIPMENT HANDLING:
- Practice safe and respectful manipulation of all equipment.
- Demonstrates accurate use of digital equipment.
- Consistently aligns the X-ray tube and the IR.

E) POSITIONING SKILLS
- Identifies anatomy seen on the images at appropriate level of training.
- Marks images correctly according to department standards.
- Produces images of consistent high quality.
- Shows competency and proficiency with positioning at appropriate level of training.

F) CRITICAL THINKING & ADAPTABILITY:
- Identifies and corrects positioning & technique errors at appropriate level of training.
- Recognizes causes of artifacts and their prevention at appropriate level of training.
- Adapts to new and changing situations or patient needs and makes reasonable decisions.
- Adapts and improvises to non-routine situations; ER, OR, Trauma.

G) ACCOUNTABILITY
- Adheres to the college and the department dress code.
- Demonstrates consistent reliability and punctuality with attendance.
- Shows consistent compliance to program's and the department's policies.
- Shows consistent compliance to the instructors' suggestions or recommendations.
- Remains alert and interested in the procedures - asks pertinent questions.

H) RADIATION PROTECTION
- Collimates to the area of interest, and in accordance with the department protocols.
- Uses shielding on patients when possible.
- Selects technical factors according to ALARA.
- Maintains compliance of department protocol with women of childbearing age.
- Strives to keep repeated images to a minimum.
- Monitors exposure index (EI) on the initial image to insure appropriate radiation delivery to the patient, and alters technical factors on subsequent images as necessary to minimize radiation exposure whenever possible.

I) ORGANIZATION:
- Plans and organizes work efficiently – anticipation of needs, room and equipment readiness.
- Demonstrates an organized and efficient work pattern during exams.
- Work at a pace appropriate for level of training.
- Demonstrates increased confidence and independence in executing tasks.

J) SENSITIVITY/UNDERSTANDING:
- Shows empathy, tolerance and adaptation to the needs of patients, their families, their coworkers and to fellow students.
- Values differences.
- Is considerate and respectful.

Signatures!!!

- Yours, and...
- The Evaluator's
- KEEP A COPY!!!

Students have been known to discard an unfavorable Progress Report!!

- "The dog ate it"!!

- What are the consequences?.

Frequency of Progress Reports?

- AT LEAST 1 every 2 weeks!!

- At proper intervals.

- **Failure to do so:**

- **Reflected in "Accountability" portion of Clinical Evaluation Form**

The Clinical Evaluation Form

Clinical Evaluation Form correlates with:

- **Course objectives**
- **Progress Reports**

- **SAME 10 CATEGORIES**

New Clinical Evaluation Form for: _____

Clinical Site: _____   Date: _____   Clinical Course RADT 71 _____

Category							Clinical Instructor Comments:

A) PATIENT CARE - Correctly identifies patient. Maintains patient modesty, confidentiality. Safely transfers patients, properly handles patient devices.
10   9.5   9.0   8.5   8.0   7.5   <7.5=FAIL

B) COMMUNICATION - Practices proper "hand-off" procedures, understanding of CI instruction, direction, requisitions, & all interactions essential to clinical performance. Consistently utilizes AIDET practices with patients & their families.
10   9.5   9.0   8.5   8.0   7.5   <7.5=FAIL

C) PROFESSIONALISM & ETHICS- Upholds the ARRT Code of Ethics, shows professionalism under stress environment, cooperates with technologists, demonstrates a team approach, takes initiative & interest in clinical education, & demonstrates judicious use of post-processing tools.
10   9.5   9.0   8.5   8.0   7.5   <7.5=FAIL

D) EQUIPMENT HANDLING - Practice safe and respectful manipulation of all equipment, accurate use of digital equipment, consistently aligns the X-ray tube & IR.
10   9.5   9.0   8.5   8.0   7.5   <7.5=FAIL

_____   _____
Clinical Instructor Name & Signature   Date

Student Comments:

E) POSITIONING SKILLS - Identifies anatomy, marks images correctly according to department standards, produces images of consistent high quality, and shows competency and proficiency with positioning at appropriate level of training.
10   9.5   9.0   8.5   8.0   7.5   <7.5=FAIL

F) CRITICAL THINKING & ADAPTABILITY- Identifies/corrects positioning, technique errors at appropriate level of training. Recognizes causes of artifacts, adapts to new and changing situations or patient needs, adapts and improvises to non-routine situations; ER, OR, trauma.
10   9.5   9.0   8.5   8.0   7.5   <7.5=FAIL

G) ACCOUNTABILITY - Adheres to the college & dept. dress code, consistent compliance to punctuality, attendance, compliance to program & department's policies, & to instructors' suggestions or recommendations. Remains alert & interested in the procedures - asks pertinent questions.
10   9.5   9.0   8.5   8.0   7.5   <7.5=FAIL

_____   _____
Student Signature   Date

Clinical Coordinator Comments:

H) RADIATION PROTECTION - Collimates to area of interest & in accordance with department protocols, uses shielding when possible, & selects technical factors according to ALARA. Maintains compliance of department protocol with women of childbearing age. Monitors exposure index (EI) on the initial image to insure appropriate radiation delivery, alters technical factors on subsequent images as necessary.
10   9.5   9.0   8.5   8.0   7.5   <7.5=FAIL

I) ORGANIZATION – Plans, anticipates needs, room and equipment readiness. Demonstrates an organized and efficient work pattern during exams. Work at a pace appropriate for level of training. Demonstrates increased confidence and independence in executing tasks.
10   9.5   9.0   8.5   8.0   7.5   <7.5=FAIL

_____   _____
Clinical Coordinator Signature   Date

Program Director Comments:

J) SENSITIVITY/UNDERSTANDING – Shows empathy, tolerance and adaptation to the needs of patients and their families, and to co-workers and fellow students. Values differences. Is considerate and respectful.
10   9.5   9.0   8.5   8.0   7.5   <7.5=FAIL

TOTAL POINTS _____ ÷ 10 = _____

_____   _____
Program Director Signature   Date

Student: Please give comments, sign and submit the signed original form to the college faculty.   REVISED 4/4/19

The Clinical Evaluation Form

A minimum score of 7.5 points in EVERY area is needed in order to pass the course.

New Clinical Evaluation Form for: _____

Clinical Site: _____ Date: _____ Clinical Course RADT 71 _____

	Clinical Instructor Comments:
A) PATIENT CARE - Correctly identifies patient. Maintains patient modesty, confidentiality. Safely transfers patients, properly handles patient devices. 10 9.5 9.0 8.5 8.0 7.5 **<7.5=FAIL**	
B) COMMUNICATION - Practices proper "hand-off" procedures, understanding of CI instruction, direction, requisitions, & all interactions essential to clinical performance. Consistently utilizes AIDET practices with patients & their families. 10 9.5 9.0 8.5 8.0 7.5 **<7.5=FAIL**	
C) PROFESSIONALISM & ETHICS- Upholds the ARRT Code of Ethics, shows professionalism under stress environment, cooperates with technologists, demonstrates a team approach, takes initiative & interest in clinical education, & demonstrates judicious use of post-processing tools. 10 9.5 9.0 8.5 8.0 7.5 **<7.5=FAIL**	
D) EQUIPMENT HANDLING - Practice safe and respectful manipulation of all equipment, accurate use of digital equipment, consistently aligns the X-ray tube & IR. 10 9.5 9.0 8.5 8.0 7.5 **<7.5=FAIL**	_____ _____ Clinical Instructor Name & Signature Date
E) POSITIONING SKILLS - Identifies anatomy, marks images correctly according to department standards, produces images of consistent high quality, and shows competency and proficiency with positioning at appropriate level of training. 10 9.5 9.0 8.5 8.0 7.5 **<7.5=FAIL**	**Student Comments:**
F) CRITICAL THINKING & ADAPTABILITY- Identifies/corrects positioning, technique errors at appropriate level of training. Recognizes causes of artifacts, adapts to new and changing situations or patient needs, adapts and improvises to non-routine situations; ER, OR, trauma. 10 9.5 9.0 8.5 8.0 7.5 **<7.5=FAIL**	
G) ACCOUNTABILITY - Adheres to the college & dept. dress code, consistent compliance to punctuality, attendance, compliance to program & department's policies, & to instructors' suggestions or recommendations. Remains alert & interested in the procedures - asks pertinent questions. 10 9.5 9.0 8.5 8.0 7.5 **<7.5=FAIL**	_____ _____ Student Signature Date
H) RADIATION PROTECTION - Collimates to area of interest & in accordance with department protocols, uses shielding when possible, & selects technical factors according to ALARA. Maintains compliance of department protocol with women of childbearing age. Monitors exposure index (EI) on the initial image to insure appropriate radiation delivery, alters technical factors on subsequent images as necessary. 10 9.5 9.0 8.5 8.0 7.5 **<7.5=FAIL**	**Clinical Coordinator Comments:**
I) ORGANIZATION – Plans, anticipates needs, room and equipment readiness. Demonstrates an organized and efficient work pattern during exams. Work at a pace appropriate for level of training. Demonstrates increased confidence and independence in executing tasks. 10 9.5 9.0 8.5 8.0 7.5 **<7.5=FAIL**	_____ _____ Clinical Coordinator Signature Date
J) SENSITIVITY/UNDERSTANDING – Shows empathy, tolerance and adaptation to the needs of patients and their families, and to co-workers and fellow students. Values differences. Is considerate and respectful. 10 9.5 9.0 8.5 8.0 7.5 **<7.5=FAIL**	**Program Director Comments:**
TOTAL POINTS _____ ÷ 10 = _____	_____ _____ Program Director Signature Date

Student: Please give comments, sign and submit the signed original form to the college faculty.   REVISED 4/4/19

Procedures:
Clinical Evaluation Form

- The Clinical Instructor fills out this form near end of grading period

- **Student** to provide form at least 10 working days in advance of due date

- Where do you find the form?

- Due dates are on rotation list...

New Clinical Evaluation Form for: _____
Clinical Site: _____   Date: _____   Clinical Course RADT 71 _____

	Clinical Instructor Comments:
A) PATIENT CARE - Correctly identifies patient. Maintains patient modesty, confidentiality. Safely transfers patients, properly handles patient devices. 10 9.5 9.0 8.5 8.0 7.5 <7.5=FAIL	
B) COMMUNICATION - Practices proper "hand-off" procedures, understanding of CI instruction, direction, requisitions, & all interactions essential to clinical performance. Consistently utilizes AIDET practices with patients & their families. 10 9.5 9.0 8.5 8.0 7.5 <7.5=FAIL	
C) PROFESSIONALISM & ETHICS- Upholds the ARRT Code of Ethics, shows professionalism under stress environment, cooperates with technologists, demonstrates a team approach, takes initiative & interest in clinical education, & demonstrates judicious use of post-processing tools. 10 9.5 9.0 8.5 8.0 7.5 <7.5=FAIL	
D) EQUIPMENT HANDLING - Practice safe and respectful manipulation of all equipment, accurate use of digital equipment, consistently aligns the X-ray tube & IR. 10 9.5 9.0 8.5 8.0 7.5 <7.5=FAIL	_____ _____ Clinical Instructor Name & Signature Date
E) POSITIONING SKILLS - Identifies anatomy, marks images correctly according to department standards, produces images of consistent high quality, and shows competency and proficiency with positioning at appropriate level of training. 10 9.5 9.0 8.5 8.0 7.5 <7.5=FAIL	**Student Comments:**
F) CRITICAL THINKING & ADAPTABILITY- Identifies/corrects positioning, technique errors at appropriate level of training. Recognizes causes of artifacts, adapts to new and changing situations or patient needs, adapts and improvises to non-routine situations; ER, OR, trauma. 10 9.5 9.0 8.5 8.0 7.5 <7.5=FAIL	
G) ACCOUNTABILITY - Adheres to the college & dept. dress code, consistent compliance to punctuality, attendance, compliance to program & department's policies, & to instructors' suggestions or recommendations. Remains alert & interested in the procedures - asks pertinent questions. 10 9.5 9.0 8.5 8.0 7.5 <7.5=FAIL	_____ _____ Student Signature Date
H) RADIATION PROTECTION - Collimates to area of interest & in accordance with department protocols, uses shielding when possible, & selects technical factors according to ALARA. Maintains compliance of department protocol with women of childbearing age. Monitors exposure index (EI) on the initial image to insure appropriate radiation delivery, alters technical factors on subsequent images as necessary. 10 9.5 9.0 8.5 8.0 7.5 <7.5=FAIL	**Clinical Coordinator Comments:**
I) ORGANIZATION – Plans, anticipates needs, room and equipment readiness. Demonstrates an organized and efficient work pattern during exams. Work at a pace appropriate for level of training. Demonstrates increased confidence and independence in executing tasks. 10 9.5 9.0 8.5 8.0 7.5 <7.5=FAIL	_____ _____ Clinical Coordinator Signature Date
J) SENSITIVITY/UNDERSTANDING – Shows empathy, tolerance and adaptation to the needs of patients and their families, and to co-workers and fellow students. Values differences. Is considerate and respectful. 10 9.5 9.0 8.5 8.0 7.5 <7.5=FAIL	**Program Director Comments:**
TOTAL POINTS _____ ÷ 10 = _____	_____ _____ Program Director Signature Date

Student: Please give comments, sign and submit the signed original form to the college faculty.   REVISED 4/4/19

Grading Consequences for Students

- Less than 75% in ANY area = course failure

- Applies to didactic and clinical

- We DO NOT encourage the phrase:

"C equals R.T."

Minimum Score for Passing…

- …throughout the RT curriculum. You will need a minimum of 75% (lowest C) to pass each course. If you do not pass a course, you cannot continue with the program.

Why is the minimum "A" a 95%???

Minimum Requirements for Passing the CLINICAL Course…

- You will need to achieve ALL of the following to pass the course:

  1. At minimum score of 75% as a total grade on the Clinical Evaluation Form
  2. No less than 7.5 points in each of the categories on the Clinical Evaluation Form
  3. Complete at least the minimum number of specified Mandatory and Elective Competency course Check-offs
  4. Complete at least the minimum number of required clinical hours during each clinical course.

Attendance Record

Santa Rosa Junior College
Radiologic Technology Program
Monthly Record of Clinical Hours

Student _____

Clinical Affiliate _____ Month of _____, 20_____

DATE	TIME IN	Initial	TIME OUT	Initial	TOTAL	DATE	TIME IN	Initial	TIME OUT	Initial	TOTAL
1						17					
2						18					
3						19					
4						20					
5						21					
6						22					
7						23					
8						24					
9						25					
10						26					
11						27					
12						28					
13						29					
14						30					
15						31					
16						Total hours this month:					

Please sign in and out daily. Use decimal format, up to two significant figures for calculating hours; e.g. 8.0 hrs, 6.25 hours. Thirty-minute (.5 hrs.) lunch is required for students in clinical site 6.0 hours or more per day. This timesheet will be conscientiously updated daily and should be an accurate representation of the time you were at the clinical site. Signed timesheets for the previous month are due at the first class meeting beginning of the next month, and at the end of the semester.

Student Signature: _____

Clinical Instructor Signature: _____

Today's Date: _____

And Still More Forms…

- Attendance Records
  - DAILY ENTRIES (w/ RT initials)
  - MONTHLY submission
  - Who can <u>sign</u> them each day?
  - Who can <u>sign</u> them each month?
  - Do I need to keep a copy?
  - What if it is not signed by the correct person?
  - How will I know my cumulative hours?

It is important to put the total hours on the timesheet AND get the LEAD CI signature before you submit it!.

Santa Rosa Junior College
Radiologic Technology Program
Monthly Record of Clinical Hours

Student _____

Clinical Affiliate _____ Month of _____, 20_____

DATE	TIME IN	Initial	TIME OUT	Initial	TOTAL	DATE	TIME IN	Initial	TIME OUT	Initial	TOTAL
1						17					
2						18					
3						19					
4						20					
5						21					
6						22					
7						23					
8						24					
9						25					
10						26					
11						27					
12						28					
13						29					
14						30					
15						31					
16						Total hours this month:					

Please sign in and out daily. Use decimal format, up to two significant figures for calculating hours; e.g. 8.0 hrs, 6.25 hours. Thirty-minute (.5 hrs.) lunch is required for students in clinical site 6.0 hours or more per day. This timesheet will be conscientiously updated daily and should be an accurate representation of the time you were at the clinical site. <u>Signed timesheets for the previous month are due at the first class meeting beginning of the next month, and at the end of the semester.</u>

Student Signature: _____

Clinical Instructor Signature: _____

Today's Date:_____

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Attendance Policy

- In the *Clinical Competency Handbook*

- Enforce those standards expected of an employee
  - Prompt after breaks
  - Reports to assigned room ON TIME
  - Calls in advance when absent or late.
    - Clinical Site – Lead tech (phone call)
    - Lead Clinical Instructor (e-mail)
    - Clinical Coordinator (e-mail)
    - Lead Clinical Coordinator (e-mail)

Do Attendance and/or Tardiness Affect My Grade?

Yes!

"Accountability"

Clinical Procedure Log:

Student Name_____Clinical Education Center _____

Semester (check one): 1. _____ 2. _____ 3. _____ 4. _____ 5. _____ 6. _____

Date	Pt. ID	Name of Exam/Procedure	Rm. or equip #	Fluoro: Exam Time	D / I	# & reason for repeats	Supervising RT (PRINT PLEASE)	Signature of RT (CRT/permit # for fluoro)

Clinical Procedure Log—Extra Sheets

Use the "Exam Logsheet" link in On-Demand Resources…copy pages from there.

Use of Procedure Logs…

- What are the purposes?
  - RHB requirement (CA regs)
  - Also useful for image analysis w/ Clinical Coordinator
  - Insures student is getting proper amount of experience
  - Documents fluoroscopy hours
- Must write down each procedure
- Keep in *Clinical Competency Handbook*.

Example: Procedure Log at

TACO BELLEVUE HOSPITAL

Student Name _Super Student_ _____ Clinical Education Center _Taco Bellvue Hospital_

Semester (check one): 1. ____✓____ 2. _____ 3. _____ 4. _____ 5. _____ 6. _____

Date	Pt. ID	Name of Exam/Procedure	Rm. or equip #	Fluoro: Exam Time	D/I	# & reason for repeats	Supervising RT (PRINT PLEASE)	Signature of RT (CRT/permit # for fluoro)
9/18	2681014	2V CXR	3		I	Ø	Andy Doodle	Andy Doodle
9/18	3974226	Port. CXR	Port.		D	Ø	Jeffry Ontrack	Jeff Ontrack
9/18	8009151	2V Abd	3		D	1 Position	Jeffry Ontrack	
9/18	2587763	Elbow	3		D	Ø	Jeffry Ontrack	
9/18	7148602	Hand	3		D	Ø	Jeffry Ontrack	↓
9/18	5986643	Barium Swallow	2	20min	D	Ø	Amy Jordan	RHF0036159 Amy Jordan
9/20	2467810	Port. CXR	Port		D	Ø	Andy Doodle	Andy Doodle
9/20	3314802	Port. CXR	Port		D	1 Artifact	Andy Doodle	
9/20	9421605	Port. CXR	Port		D	Ø	Andy Doodle	↓
9/20	7707553	2V CXR	3		I	Ø	Sherry Mantor	Sherry Mant
9/20	1000621	Wrist	3		D	Ø	Sherry Mantor	
9/20	8587763	Shoulder	3		D	Ø	Sherry Mantor	
9/20	6640002	Shoulder	3		D	Ø	Sherry Mantor	↓
9/20	0133805	Upper GI	2	35min	D	Ø	Amy Jordan	RHF0036159 Amy Jordan

(55min Total)

Highlight all fluoro exams
Include CRT Permit #
Include time (duration) of exam.

Exam Logsheet 2019. Supersedes all previous.

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State (CDPH-RHB) Requirements:

- ACS posted (Affiliated Clinical Setting)
- State inspectors may drop in any time (unannounced)
  - View student's "Exam Logsheet"
  - Repeats, REASON, and RT signature required (on the log)
  - May want to see images!.

State (CDPH-RHB) Requirements:

- Program must keep records for 5 years after student graduates…State law

- We archive the scans of all your records

- Grade transcripts kept by SRJC indefinitely

- Radiation Monitoring records are kept

- YOU MUST MAKE A COPY OF EVERYTHING PRIOR TO SUBMISSION OF RECORDS.

YOUR Radiation Safety:

- Be sure to take your radiation monitoring records "with you" as you become employed as an RT after graduation

- Your radiation records are cumulative…keep a record of all of your exposures when you change places of employment.

Program Requirement:

- Student MUST complete all clinical course hours to be eligible for graduation

- Approximately 1785 hours total by end of training (EXACT number given to you by the P.D.)

- Exact number varies due to semester holidays, but exact amount is posted in Clinical Competency Handbook upon entrance into the program

- And check the clinical roster with each new clinical course…EXACT required hours are there.

JRCERT Requirements Plus Labor Laws…

- Student must take a 30-minute lunch break if present more than 6 hours (Lunch break is NOT included in your recorded clinical hours.)

- Students should have two 10-minute breaks in a 9-hour day

- Student may not exceed 10 hours in one day

- Student may not exceed 40 hours per week (combined lecture, lab, & clinical).

Oh, Surprise, More Forms...

Testing Your Knowledge...

- Where do you find the due dates for all records at end of grading period????

- Where do you submit the Clinical Evaluation Form? Monthly attendance sheets? All student records (at end of grading period)?

- Must be submitted <u>on time</u>, or a grade of F is awarded.

  Keep a copy of everything you submit!!.

Where do we retain the….

- Bi-weekly Progress Reports?

- Clinical Evaluation Forms?

- Monthly Attendance Forms?

- *Clinical Handbooks* at end of semester?.

RADIOLOGIC TECHNOLOGY

CAREER EDUCATION | AT SRJC

Custom Search

HEALTH SCIENCES HOME   RAD TECH HOME   PROGRAM REQUIREMENTS   FAQ   ON-DEMAND RESOURCES FOR CI'S   MAMMOGRAPHY   RAD TECH FACULTY

WELCOME TO RADIOLOGIC TECHNOLOGY

ARE YOU INTERESTED IN A CAREER AS A RADIOLOGIC TECHNOLOGIST?

Radiologic Technology is the health profession concerned with medical imaging for diagnosis and assessment of disease. Radiologic Technology is known by other names including x-ray technology, radiologic technology, radiography, and diagnostic imaging. The radiologic technologist provides a unique blend of direct patient contact with the study of human anatomy and rigorous medical technical expertise. Graduates with a degree in this field are referred to as registered radiologic technologists or radiographers. The career opportunities are numerous and diverse.

The radiologic technologist's main duty is to provide quality patient care and high quality medical images while applying knowledge of anatomy, physiology, positioning, radiographic technique, and precise scientific knowledge. Effective communication with patients, other health professionals, and the public is important. Additional duties may include management of images, evaluating radiologic and computer equipment, performing quality assurance procedures, and providing patient education relevant to specific imaging procedures.

RADIOLOGIC TECHNOLOGY AT SRJC

The Radiologic Technology Program at SRJC was established in 1971. Both a certificate and a major AS degree in Radiologic Technology is available. The program includes instruction in the operation of x-ray and digital imaging equipment, positioning for radiologic procedures, creating and processing images, patient care, radiologic physics, radiation protection and observational experience in other advanced imaging modalities.

The radiologic technology program at SRJC spans 23 consecutive months including 2 fall, 2 spring and 2 summer semesters. Students are required to commit themselves for full time participation for that entire duration. In addition to the didactic coursework, a minimum of 1785 clinical hours are required in hospitals and radiology departments affiliated with Santa Rosa Junior College. Elective clinical experience in Mammography and MRI is available. Fundamental knowledge of CT and cross sectional anatomy is included in our core curriculum.

ACCREDITATION: The SRJC Radiologic Technology Program is accredited by the Joint Review Committee on Education in Radiologic Technology (JRCERT). Our program received the maximum 8-year accreditation award effective 2015.
20 North Wacker Dr. Suite 2850
Chicago, IL 60606-2901
(312) 704 5300
E-mail: **mail@jrcert.org** / Website: http://www.jrcert.org/

APPROVAL: The SRJC Radiologic Technology Program is approved by the California Department of Public Health Radiologic Health Branch as an educational program for radiologic technology.

MS 7610
P.O. Box 997414
Sacramento, CA 95899-7414

PROGRAM MISSION

Based on the major missions of the college, the faculty of the Radiologic Technology Program at Santa Rosa Junior College is dedicated to facilitating the growth and development of enrolled students in becoming competent entry-level radiologic technologists to function within the healthcare community they serve.

PROGRAM OBJECTIVES

Program Objectives; The major goals of the Santa Rosa Junior College Radiologic Technology Program are to assist the enrolled students:

- in performing positioning skills with accuracy, utilizing skills in radiation protection, and demonstrating proper equipment handling.
- in utilizing critical thinking in recognizing image quality and adapting to non-routine patients and procedures.
- in demonstrating good communication in clinical environment, as well as demonstrating good oral and written communication.
- in demonstrating professionalism and understanding of ethical decision making.

PROGRAM STUDENT LEARNING OUTCOMES

Upon successful completion of the program, the student will be able to:

1. Deliver high quality patient care service in radiology;
2. Observe a high level of medical ethics;
3. Perform radiographic job duties with professionalism;
4. Use effective communication skills;
5. Use critical thinking skills to analyze and resolve imaging issues;
6. Demonstrate clinical competency of an entry-level technologist.

RESOURCES FOR STUDENTS

(if you need assistance accessing any of these documents, please contact **sallen@santarosa.edu** *- we will get back to you as soon as we can)*

CLASS HANDBOOKS:

2021 Student Handbook

2021 Clinical Competency Handbook

2020 Student Handbook

2020 Clinical Competency Handbook

PROCEDURES:

Clinical Experience

FORMS AND RESOURCES:

>> REQUEST FOR SPECIAL CLINICAL ASSIGNMENT <<

Authorized_Signatures

Biweekly Progress Report

Clinical Education Centers Fall 2018

Clinical Schedule form

Dosimeter Guidance

Exam Logsheet

Monthly Timesheet

Orientation Verification

Pre-Rotation Form

Semester Final Clinical Evaluation Form

3 way Conference form

C-Arm checkoff sheet

CT checkoff sheet

WORKERS COMP DOCUMENTATION

READ ME FIRST
WC_Health_SFac_Procedures

File this in ALL cases of Workers Comp
RT_Incident_report_form

File this in ALL Cases of Workers Comp
Train_Work_Exposure_Form

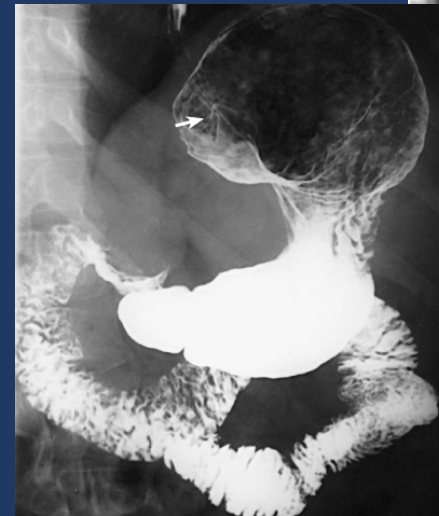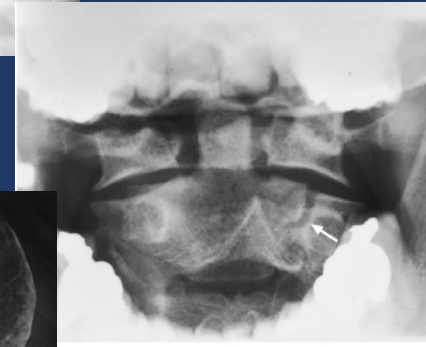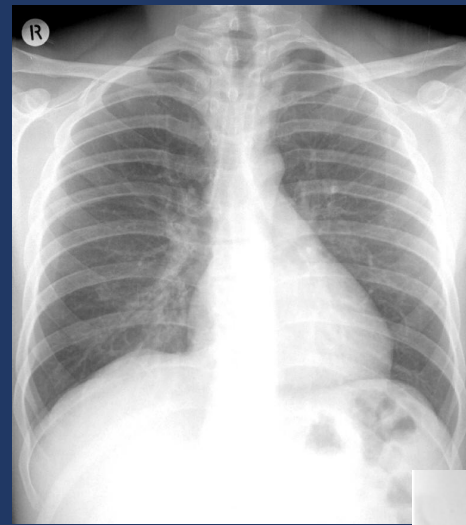File this in ALL cases of Workers Comp
RT_Supervisors_Report_of_Injury

If it applies.
Sharps_Form

Image Analysis

- RTs provide <u>per exam</u>

- LCI provides weekly

- And CC provides during visits

- Assesses that the student is progressing appropriately

- CI may want to initiate the Competency Recheck where a problem has been identified.

Note: The RTs should review ALL images with the student before EACH exam is completed.

IMPORTANT!

- Regardless of level of training, ALL images must be reviewed by an RT before sending to PACS!!!

- If repeat, then what should occur?

- What if an RT is not right there?.

Mark Your Procedure Logs…

- …for those exams of which you are proud!

- …or those for which you have questions!

- …and even your mistakes!.

ALARA

- What does this mean?

- Some examples:
  - Proper collimation
  - Use of gonadal and other shields
  - Proper use of grids
  - Phase of respiration
  - Technical factors
  - CHECKING EXPOSURE INDICES…

Classroom Practices vs. Clinical Practices

- What do you do when there is a discrepancy between what you are taught and what you will see "in the field"?

- Are YOU a professional?.

Some Patient-Centered Considerations…

- HIPAA

- AIDET

HIPAA

- Health Insurance Portability and Accountability Act

- Federal act
- 1996

- Relates to patient confidentiality rights.

TAKE NO PHOTOS!

AIDET, acronym for:

Advantages of AIDET®:
Decrease anxiety with increased compliance.

Decreased Anxiety + Increased Compliance = Improved clinical outcomes and increased patient and physician satisfaction

- Acknowledge
- Introduce
- Duration
- Explanation
- Thank you

- Will cover more of this important information in Patient Care!

Becoming a Part of the Team

- DO – show up on time and look professional

- DO – take advantage of every opportunity

- Do – offer to help clean, stock, set-up…

- Do – be considerate of patient privacy, show empathy

Do not...

Attitude	Have a bad attitude towards the assignment you've been given. There are learning experiences in EVERY situation.
Cell Phones	Take care of personal business during clinical time. Put your phone away.
Behavior	Be cocky! No one likes someone who shows off, thinks they know everything, etc.
Privacy	Take paperwork home with patient information on it.
Social Media	Post any specifics about your clinical rotation on social media or share on the internet at all!

This is your….

Employment interview for your future job!

Make your BEST impression every day!!

Be sure to re-read ALL information in the Clinical Competency Handbook!!

IMPORTANT DATES to calendar NOW:

- **9/6/22:** First day of clinical experience (RADT71A)
- **9/15/22:** Bi-Weekly Progress Report

  (At end of 2nd week and every 2 weeks after that.)

Christine McLarty
cmclarty@santarosa.edu