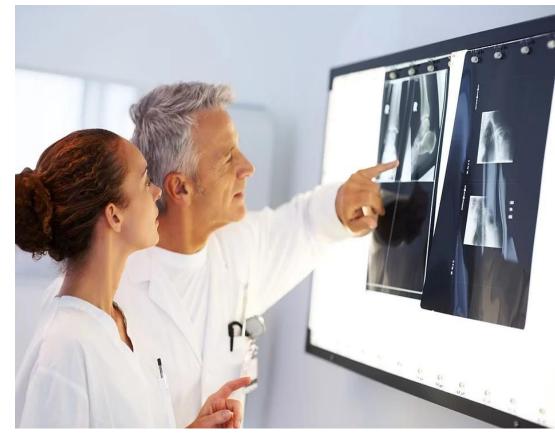




# Radiologic Technology Program

# **2 0 1 9**



# Clinical Handbook

Revised: December, 2018

Clinical Narrative 2019

Dear Student Radiographer,

This clinical manual was developed to assist you as you progress through the Radiologic Technology Program at Hostos Community College. It contains the information you will need regarding the clinical portion of the program. *It is your responsibility to carefully review this information and abide by all the rules and regulations set forth in this manual.* 

The regulations in this handbook may be changed by way of department notice. Should you have any questions, contact the Clinical Coordinator for clarification. We wish you success as you begin your clinical education in radiologic technology.

Dr. Charles I. Drago, Program Director

**Class of 2020** 

Clinical Narrative 2019

# **CLINICAL EDUCATION MANUAL**

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Clinical Narrative 2019

# **CLINICAL EDUCATION MANUAL**

#### 1. INTRODUCTION

Students in the Radiologic Technology Program have the opportunity to participate in a planned system of clinical education combining activities in major medical centers and an on-site energized laboratory.

Students are assigned to two (2) clinical affiliates during their clinical education.

- First year students begin their clinical education during the second semester (spring), and attend clinical two days a week. During the summer semester, students will continue at the same hospital five days a week.
- Each student will be assigned to a second hospital as they begin their senior year. Clinical will be three days a week during the fall and spring semesters and two to five days a week during the summer semester.

Students are closely monitored at the clinical affiliates by the college's designated clinical supervisor for each hospital. The clinical supervisor, who is a member of the hospital staff, is responsible for the general supervision of the students. The clinical supervisor conducts the hospital orientation, monitors attendance, determines room assignments and works closely with the clinical coordinator and clinical instructor. The clinical instructor, who is a college faculty member, is assigned to visit the hospital each week. The clinical coordinator also makes regularly scheduled visits to each clinical education center.

#### 2. PHILOSOPHY OF CLINICAL EDUCATION

The Radiologic Technology Program faculty believes that every student, if provided with an optimum educational experience and opportunities, will be able to perform all routine radiographic procedures. Therefore, the program provides demonstration, supervision, and evaluation in the clinical setting to enable the student to effectively:

- A. Apply knowledge of the principles of radiation protection for the patient, self and others.
- B. Apply knowledge of anatomy, positioning, and radiographic technique, displayed on a digital medium to accurately evaluate radiographic images.
- C. Determine exposure factors to achieve optimum radiographic quality with a minimum radiation exposure to the patient.
- D. Examine radiographic images for the purpose of evaluating techniques, positions, and other pertinent technical and pathological details.
- E. Provide patient care.
- F. Establish interpersonal communication with the patient and other members of the health care team.

#### 3. CLINICAL OBJECTIVES

The primary objective of clinical education is to correlate the students' clinical experience with the didactic portion of the program. This correlation is based upon a foundation of fundamental principles

and procedures that develop into superior performance and knowledge as proficient technologists. The evaluation system is specifically designed to include assessment of the affective, cognitive and psychomotor domains. The Radiologic Technology Program provides a clinical environment structured to develop a competent, entry-level professional who:

- A. Integrates cognitive and psychomotor aspects of the curriculum to assure a meaningful clinical practicum.
- B. Performs basic radiographic examinations under direct and indirect supervision of a licensed radiologic technologist.
- C. Performs examinations to demonstrate clinical competency for each radiographic procedure.
- D. Possesses professional maturity.
- E. Maintains high ethical standards.
- F. Recognizes the role as a student technologist as an important part of an effective health care team.
- G. Recalls knowledge based on the applied principles of radiologic technology.
- H. Initiates radiographic procedures with an integrated knowledge of human structure, function and radiographic positions.
- I. Indicates proper use of image receptors, markers, and digital imaging and processing.
- J. Recalls knowledge of radiographic pathology in applying the appropriate principles of radiographic exposure.
- K. Applies knowledge of radiation physics and instrumentation to the operation of radiographic equipment.
- L. Utilizes knowledge of radiation protection to minimize radiation exposure to patients, personnel and the general public.
- M. Utilizes correct patient care procedures in routine and emergency patient care.
- N. Communicates effectively with the patient in a professional and caring manner.

#### 4. CLINICAL EDUCATION SEQUENCE

# 4A. Junior Year Course Sequence

#### Fall Semester

Students are not assigned to the hospital during the first semester. They begin their clinical education at the college, in the laboratory component of the following courses:

- XRA 111 Radiologic Science I & Lab
- XRA 110 Radiography I & Lab

# Spring Semester

Students begin their hospital experience with a two days per week clinical rotation while continuing advanced laboratory practice in the following courses:

- XRA 121 Radiologic Science 2 & Lab
- XRA 120 Radiography 2 & Lab

#### Summer Semester

During the summer semester, students will continue at the same hospital for 5 days a week. During this time, students will ONLY receive three (3) personal days during the summer semester. All days used by the student must be communicated to the clinical Education center Supervisors as well as the Clinical Coordinator.

# **4B. Senior Year Course Sequence**

# Fall and Spring Semesters

Students are assigned to a different hospital for their senior year. The fall and spring clinical courses are three days a week. Students attend classes two days a week at the college.

#### Summer Semester

Students are assigned to work at one of the program's clinical education centers full-time Monday through Friday from 8:00 a.m. to 4:00 p.m. during the summer sessions. The exact dates of the summer session change each semester; however, clinical internships usually begin the first week of June and end in August.

#### 5. CLINICAL ROTATIONS

#### 5A. Junior Year Rotation

Spring: Clinical I February - May 2 days a week Summer: Clinical II June - August 5 days a week

#### 5B. Senior Year Rotation

Fall: Clinical III September—December 3 days a week
Spring: Clinical IV January—May 3 days a week
Summer Clinical V June-August 2-5 days a week

#### 6. CLINICAL EDUCATION RULES AND REGULATIONS

The clinical education is provided in the Radiologic Technology curriculum to enable the student to correlate and practice various radiographic skills and to meet the legal requirements for licensure and registry eligibility. Students are expected to fulfill their clinical education under appropriate supervision of a clinical supervisor and clinical instructor. The college faculty visits the hospitals to observe and evaluate the students' clinical performance.

The following is a list of the rules and regulations concerning the clinical practicum that all students enrolled in the Radiologic Technology Program are required to follow.

#### 6A. General Clinical Practicum Policies

- 1) Students must successfully complete the following prerequisites before they advance to XRA 129 Clinical Radiography I.
  - Clinical Education Center Requirements
    - Physical exam (student's responsibility)
    - I.D. badges
    - Immunization records (student's responsibility)
  - Pre-Clinical Radiation Protection requirements
  - Background check (Castle Branch) (student's responsibility)
  - Drug background (Castle Branch) (student's responsibility)
- 2) Students must complete their clinical education at the affiliation designated by the college. New York State Law mandates clinical practicum.
- 3) Clinical practicum is an eight-hour a day shift with one hour for lunch. Hospital hours are 8:00 a.m. to 4:00 p.m. It is the student's responsibility to schedule outside commitments to conform to this requirement. Absolutely, no changes can be made to this requirement without the prior written approval of the Clinical Coordinator.
- 4) Students must always work under direct and indirect supervision at the clinical education center as determined by the students' clinical competency.
- 5) At no time will anyone be radiographed at the clinical education center without a specific request, in writing, by a physician or their designee. Students may be subjected to dismissal from the program.
- 6) Student are subject to all the rules and regulations of the clinical education centers. The clinical affiliate has the right to request the removal of any student who demonstrates any breach of their rules or displays unethical behavior.

- 7) Attendance records are kept at the clinical education centers. Students must sign in (manually or electronically) when they arrive and sign out when they leave. No clinical credit will be given if the student's signature is not on record or if the attendance records are incomplete.
- 8) Students must be attired in proper, clean uniform at all times when at the clinical affiliates. Students will maintain a neat, presentable appearance and comply with the hospital's policies concerning personal hygiene and grooming, which includes but not limited to:
  - Proper Hostos uniform
  - Proper white shoes and socks
  - Excessive or oversized jewelry is not permitted while on duty.
  - Hair and nails must be in compliance with infection control policy
  - Lab Coat
  - Dosimeter
- 9) In accordance with New York State law, all students are required to wear <u>name</u> badges specifying "Student Radiologic Technologist."
- 10) Students must maintain, and have on their person and/or readily available, their:
  - Pocket Guide to Radiography (latest edition)
  - Case log record
  - Blue Competency Inventory Pamphlet
  - Ink pen
  - Lead markers R/L
  - Dosimeter
- 11) Student will be issued two dosimeters; one to be worn only in the college laboratory and the other at their assigned clinical education center. If the dosimeter is lost or misplaced, the student must contact a faculty member of the Radiologic Technology Program at Hostos Community College immediately. *Students are NOT permitted to be at the clinical education center without a dosimeter*. In addition, students are not allowed to accept a replacement dosimeter issued by the clinical education center. If available, a temporary dosimeter will be issued by the Radiologic Technology Program while a new one is ordered from the dosimeter vendor. Please handle dosimeters with care. It records your exposure to ionizing radiation ad improper care may result in false positive readings. Time missed because of a lost or missing dosimeter must be made up and points will be deducted from the final grade.
- 12) Students will be responsible for returning their dosimeters to the College Laboratory by the posted date. Failure to comply with this regulation will result in points being deducted from the clinical grade. Students are responsible for returning their dosimeters in person.
- 13) It is the student's responsibility to initial the monthly radiation exposure reports in compliance with New York State Law.
- 14) The Program Director reserves the right to change clinical education assignment rotations at any time during the program.
- 15) Students' clinical evaluation forms are completed each semester.
- 16) A physical examination is required before each clinical rotation. Students are <u>required</u> to have the Hepatitis B vaccine that may be available at our clinical affiliates, or at the College. Offsite free vaccinations locations are available upon request.

- 17) Students must adhere to the same health and safety standards as new employees of the hospital education centers. *The physical examination may include drug screening.*
- 18) It is the student's responsibility to complete and submit a written statement and/or an incident report to the clinical coordinator *within 24 hours* if an accident occurs at the clinical education center.
- 19) All examinations performed on pediatric patients must adhere to the Pediatric Policy. (See 11F)
- 20) Reasons for student suspension or dismissal from the program include, but are not limited to the following:
  - Falsifying attendance records.
  - Signing in or out for another student.
  - Leaving the assigned area without permission.
  - Negligence which causes injury to a patient.
  - Performing examinations with inappropriate supervision.
  - As identified by the ARRT code of ethics, any illegal, unethical or immoral act or behavior.
  - Violating hospital policies
  - Imaging incorrect patient or body part
  - Performing exam without proper requisition
- 21) The use of cellular phones/cameras and other electronic personal devices within clinical facilities is restricted. Cell phones must be kept on silent mode at all times while in clinic, and may be used for personal business only on breaks and during meal periods. This includes sending and receiving personal text messages. Urgent calls and text messaging may only be done in non-work and non-patient care areas of the hospital.

#### **6B.** Clinical Attendance Policies

#### 6B.1. Clinical Lateness

Lateness may result in points being deducted when assigning a clinical grade.

Any type of lateness is unacceptable. Habitual lateness may result in a reprimand and additional monitoring. Students who report any time after 8:00 a.m. are considered late. Three excessive lateness will be counted as one clinical absence and subject to the clinical absence policy.

Arrival 15 minutes or later will be considered an "excessive lateness" and may result in an unexcused absence and student may be sent home.

Second lateness will result in 5 points deduction from final grade.

Each additional lateness will result in an additional 5 points deduction from the final grade.

#### 6B.2. Clinical Absences

All absences in excess of the allowable absences for that semester will result in points being deducted when assigning a clinical grade.

See below for infractions of exceeding the allowable absences:

Class	Allowable Absences	Point Deductions
Spring - XRA 129 Clinical Radiography I	2 days a semester	5 points for each day over 2 days
Summer - XRA 139 Clinical Radiography II	3 days a semester	5 points for each day over 3 days
Fall - XRA 219 Clinical Radiography III	3 days a semester	5 points for each day over 3 days
Spring - XRA 229 Clinical Radiography IV	3 days a semester	5 points for each day over 3 days
Summer - XRA 239 Clinical Radiography V	1 day a semester	5 points for each day over 1 days

#### **PLEASE NOTE:**

Extended absences due to extenuating circumstances will be considered on an individual basis if proper documentation is provided.

## 6B.3. Required Notification

If a student is going to be absent from clinical practice, or excessively late, it is the student's responsibility to telephone the appropriate individual (Properly identify yourself and note the name of the person you spoke to) at the hospital at least one hour <u>before</u> the start of their shift. Failure to adhere to this policy will result in disciplinary action. Failure to comply will result in points being deducted.

#### **PLEASE NOTE:**

Notifying a fellow student is not acceptable. Students must notify the Clinical Supervisor or his/her designee and get the name of the person you spoke with. If unable to reach a hospital employee, leave a voice message for the clinical coordinator at 718 518 4118.

#### 6C. Clinical Probation and Dismissal Policies

Clinical Probation is the official notification to the student of unacceptable behavior or unsatisfactory clinical performance. Clinical probation status is conferred at the discretion of the Program Coordinator and the Clinical Coordinator for any unsafe or unprofessional behavior.

The following include but are not limited to the behaviors that may lead to clinical probation:

- Causing harm to a patient
- Unsafe practice in the clinical area
- Unexcused clinical absences beyond the permissible allotment
- Failure to notify faculty, supervisors of lateness or absences at their designated clinical education center
- Failure to follow direct and indirect supervision guidelines

- Non-adherence to HCC radiologic technology student uniform policy
- Unprofessional conduct

#### **Clinical Probation Procedure:**

- A discussion begins with the Program Coordinator and Clinical Coordinator. A contract
  describing the terms of the probation will be given to the student and a copy placed in the
  permanent student file.
- Clinical probation may result in a reduction of the clinical grade or, if the circumstances
  warrant, the student may be removed from the clinical education center. The specific terms of
  the probation will be established by the Program Director in consultation with the Clinical
  Coordinator. This will result in an individualized contract specific to the behaviors that need
  modification.

#### **Resolution of Probation**

Disciplinary probation status will be removed when the student meets the conditions set forth in
the contract from the Program Coordinator outlining the conditions of his/her probation and if
the student has no other incidents of unacceptable behavior or unsatisfactory clinical
performance.

#### **Clinical Probation Limitations**

• When a student demonstrates a **consistent lack of performance** in the clinical requirements of the program, and has performed below average or has not satisfactorily completed the terms of clinical probation, the student will be terminated from the program.

#### **Dismissal Policy**

• Any insubordinate, unsafe, unprofessional, or unethical behavior may result in the clinical education center requesting the removal of a student. Hostos Radiologic Technology Program is under no obligation to place the student in another clinical education center.

# **6D.** Substance Abuse Policy

The department recognizes that alcoholism and other forms of drug dependencies are treatable health conditions. However, a disease in which the student's consumption of alcohol, or regular use of psychotropic drugs, interferes with his/her job performance and or his/her health may be grounds for suspension or termination.

Students will be screened for drugs before starting their clinical rotation. If the test is positive for drugs or alcohol; the student will be removed from their clinical course. A leave may be granted not to exceed one year.

In order to be readmitted to a clinical education center, the student must:

- Meet with a college counselor to determine their course of treatment
- Complete a prescribed drug/alcohol treatment program
- Submit documentation confirming completion of treatment
- Agree to random drug testing for the remainder of the program at the student's own expense

Continued abuse and/or resistance to rehabilitation will lead to termination from the program.

## **6E.** Communicable Disease Policy

The purpose of this policy is to assure the health and safety of students, patients and staff. If a student contracts a communicable disease, or has reason to believe that he/she has been exposed to a communicable disease, the following steps should be taken:

- 1. Report it immediately to the Program Director, who will refer the student to the college health service facility where he will be seen by the college nurse.
- 2. The Program Director will notify the affiliate clinical supervisor and if exposure was due to a clinically related incident the supervisor will be required to submit a written report of the incident.
- 3. The student may be referred to the employee health service at the clinical affiliate.
- 4. When all reports are received by the Program Director, a faculty committee will be formed to assess the situation and determine when the student may continue his/her clinical education.

#### **6F.** International Student

Any international student may apply for admission to a matriculated program at CUNY regardless of immigration status.

However, the radiology program has five mandatory clinical semesters of hospital internships. The hospitals require that all medical staff and employees be able to prove their *legal presence* and their *legal eligibility to work* in this country. Legal presence means that a person is either a U.S. citizen or is legally authorized to be in the United States. Legal presence can be proved using a U.S. birth certificate, U.S. passport, Certificate of Citizenship or Naturalization, Resident Alien Card or a valid foreign passport with a visa, I-94 or an

I-94W with a participating country. The hospitals reserve the right to deny access to students who are unable to prove their legal presence in this country.

Furthermore, the hospital internship is an essential, legal requirement as specified in the Joint Review Committee on Education in Radiologic Technology *Standards for an Accredited Educational Program in Radiologic Sciences*.

Consequently, the radiology program only accepts students into the clinical phase of the program if they can prove their legal presence and their legal eligibility to work in the United States. Students are encouraged to reapply for admission into the program after they have established their legal presence in the Unites States.

# 6G. College Closings

All students must register for the CUNY ALERT SYSTEM.

When the college is closed due to legal holidays, severe weather, natural disasters or other emergencies, students are not required to attend clinical. You may obtain further information by calling the College's general number 518-4444 for a recorded message, or go to the Programs Community Site. Information will also be broadcast on the following radio stations:

WADO	1280 AM	
WBLS		107.5 FM
WCBS	880 AM	101.1 FM
WFAS	1230 AM	104 FM
WINS	1010 AM	
WLIB	1190 AM	

#### 7. ORGANIZATIONS

Students may wish to contact the following organizations for additional information and materials:

Accreditation: Joint Review Committee on Education in Radiologic Technology

20 North Wacker Drive, Suite 900 Chicago, IL 60606-2901 (312) 704-5300 www.jrcert.org

Curriculum: American Society of Radiologic Technologists

15000 Central Avenue, N.E. Albuquerque, NM 87123-3917 (505) 298-4500

www.asrt.org

Certification: American Registry of Radiologic Technologists

1255 Northland Drive St. Paul, MN 55120-1155 (651) 687-0048

www.arrt.org

A copy of the JRCERT standards of practice is available at <u>www.jrcert.org</u> and a reserved copy is kept in the program director's office.

#### 8. FACULTY

Jarek Stelmark, MBA, RT (R)(CV)(CT)(MR)(QM)(BD)(VI) Sanjay Arya, MS, RT (R)(MR)

Rayola Chelladurai, MA, RT (R) Manuel Livingston, MSEd, RT (R)(CT)

Ramon Tejeda, BS, RT (R)

Gifty Adjei, MBA, RT (R)

Frances Dietz, MPH, RT (R)(M)(CT)(QM)

Sesar Alicea, BS, RT (R)
Arthur Carosi, BS, RT (R)(CV)
Stephanie Castillo, BS, RT (R)

Eric Gallo BS, RT (R)

Maria Parreno, BS, RT (R)(M)(CT)(MR)

Timothy Tambe, BS, RT (R)

Associate Professor Assistant Professor

Asst. Prof. & Radiation Safety Officer

**Assistant Professor** 

College Laboratory Technologist

Adjunct Asst. Professor Adjunct Asst. Professor

Adjunct Lecturer

#### 9. CLINICAL AFFILIATIONS

The Radiologic Technology Program at Hostos Community College is affiliated with some of the finest Medical Centers in the New York metropolitan area. The program is presently affiliated with the following institutions:

# 9A. Montefiore Medical Center, Weiler Division

1825 Eastchester Road 3rd Floor Bronx, New York 10461

Telephone: (718) 904-2768 or 2550

Clinical Supervisor: Mr. M. Cangro Radiology Administrator: Mr. G. Fata

**Travel Directions:** 

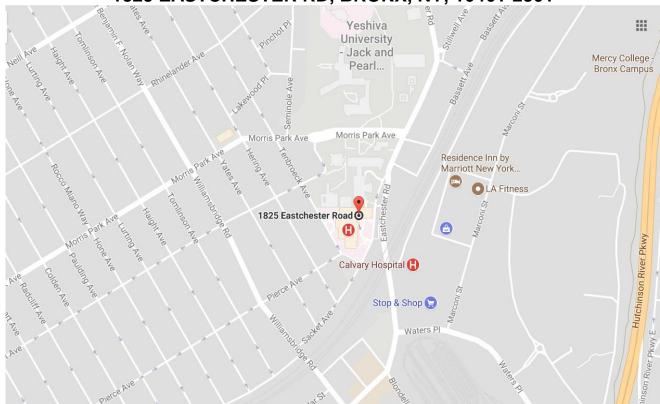
#4 subway to Fordham Road Transfer to #12 bus to Eastchester Road

Transfer to #12 bus to Eastenester Re

#5 subway to 180<sup>st</sup> St. Transfer to #21 bus

#6 subway to Westchester Sq. Transfer to #31 bus to hospital

1825 EASTCHESTER RD, BRONX, NY, 10461-2301



# 9B. Saint Barnabas Hospital

4422 Third Avenue (183rd Street) 4th floor, main building Bronx, New York 10457

Telephone: (718) 960-9000 x-6162 or x-4203

Clinical Supervisor: Mr. Y. Baby Radiology Administrator: Mr. L. Beam

Travel Directions: #36 bus to 180<sup>th</sup> Street

Transfer to #15 or 55 bus to  $183^{rd}$  St.

#2 or #5 subway to  $149^{th}$  St. and  $3^{rd}$  Ave.

Transfer to #15 or #55 bus

#4 subway to 180<sup>th</sup> Street Transfer to #36 bus

4422 3RD AVE, BRONX, NY, 10457-2527 UNIVERSITY ority... HEIGHTS 183 St M FORDHAM HEIGHTS **Bronx Community** College 182-183 Sts M E Fordham 4422 Third Avenue WEST BRONX MORRIS HEIGHTS Bronx Zoo & M Tremont Av Echo PI MT HOPE E 176th St 174-175 Sts 2A 95 E 173rd St WEST FARMS Mt Eden Pkwy

# 9C. Bronx Care Health System

1650 Grand Concourse Main floor Bronx, New York 10457

Telephone: (718) 518-2726 or 5574 Clinical Supervisor: Ms. Y. Rodriguez Radiology Administrator: Ms. S. Acevedo

Travel Directions: #4 subway to Mount Eden Ave.

Walk three blocks east to Grand Concourse

D subway to 174/175 St. Walk three blocks south

# 9D. Lincoln Medical and Mental Health Center

234 East 149th Street 2<sup>nd</sup> floor Bronx, New York 10451

Telephone: (718) 579-5744 Clinical Supervisor: Ms. Evelyn Salazar

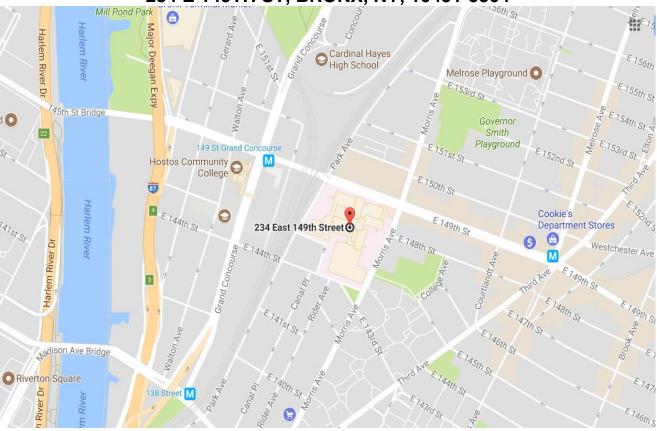
Mayra Soler

Radiographer Administrator: Sesar Alicea

Travel Directions: #2, 4 or 5 subway to 149th St. & Grand Concourse

walk two blocks east.

234 E 149TH ST, BRONX, NY, 10451-5504



# 9E. Lenox Hill Hospital - Northwell Health

100 E. 77<sup>th</sup> Street 3<sup>rd</sup> Floor New York, New York 10021

Telephone: (212) 434-2952 Clinical Supervisor: Mr. E. Gallo Radiology Administrator: Mr. F. DeSarno

Travel directions: #6 subway to 77<sup>th</sup> Street

The Ramble Alice in Wonderland

Fountain Alice in Wonderland

Foun

# 9F. Memorial Sloan-Kettering Cancer Center

1275 York Avenue 2<sup>nd</sup> floor New York, New York 10021

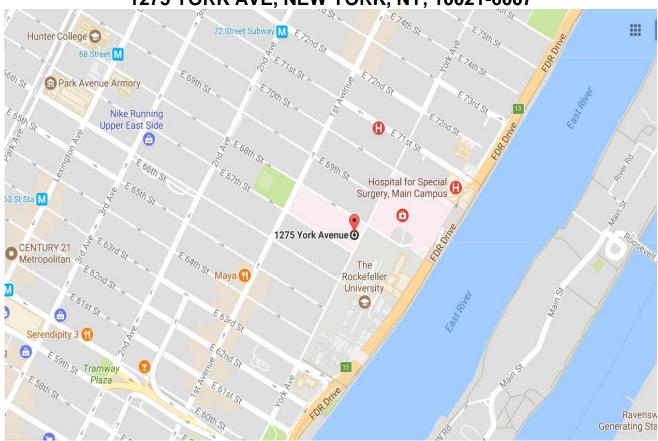
Telephone: (212) 639-7298 Clinical Supervisor: Mr. S. Del Rio

Travel Directions #6 subway to 68th St.

Walk three blocks east to First Avenue

#M15 bus to 68<sup>th</sup> St. and First Avenue #M57 bus to 67<sup>th</sup> St. and York Avenue

1275 YORK AVE, NEW YORK, NY, 10021-6007



# 9G. Madison Radiology

1820 Madison Avenue New York, New York 10035

Telephone: (212) 860-3500 Chief Technologist: Jessica Guzman

Travel Directions #2 subway to 116 St.

Walk 8 minutes to Madison Avenue

#4 subway to 125 St.

Walk 10 minutes to Madison Avenue

#M1 bus to 5<sup>th</sup> Ave/W 118<sup>th</sup> Street Walk 2 minutes to 1820 Madison Avenue

1820 MADISON AVE, #A, NEW YORK, NY, 10035

The Studio Museum in Harlem Program of Street Market Stre

#### 10. CLINICAL RADIOGRAPHY COURSES

XRA 129	Clinical Radiography I	2.0 credits	16 hours/week
XRA 139	Clinical Radiography II	3.0 credits	40 hours/week
XRA 219	Clinical Radiography III	2.5 credits	24 hours/week
XRA 229	Clinical Radiography IV	2.5 credits	24 hours/week
XRA 239	Clinical Radiography V	2.5 credits	16-40 hours/week

#### 11. CLINICAL SUPERVISION

Students are required to complete the five (5) clinical courses listed above. As the student begins the sequence with Clinical Radiography I, the student will observe radiographers performing a wide variety of procedures. After 3 weeks of observing, the student will begin to assist the radiographers with these examinations.

As the student gains more confidence and experience, the student will advance to a mode of direct supervision. After working with the radiographers for 3 weeks, a faculty member will begin your competency testing in each of the competency categories.

After testing competent, the student will advance to a mode of indirect supervision, where the supervision is provided by a qualified radiographer who is "immediately available" to assist. Immediately available means the physical presence of a licensed radiographer adjacent to the room or location where a radiographic procedure is being performed.

Direct supervision of junior students is always required in the following situations:

- 1. Critical care patients
- 2. Patients accompanied by an attendant or nurse
- 3. Acute care patients, i.e.

Multiple lines

Oxygen

Drainage tubing

4. Special situations, i.e.

**Pediatrics** 

Pregnant patients

Operating room examinations

Mobile and bedside examinations

The following terms are defined to clarify student capabilities for each clinical course:

#### 11A. Restricted Areas

These are radiographic areas and/or examinations that the student has not covered in his or her didactic courses. Students cannot be assigned to these areas until they have completed the appropriate didactic training.

#### 11B. Observation

The student may not act as a radiographic assistant. They cannot perform the examination or make any radiographic exposures.

# 11C. Direct Supervision (Level 1)

Direct supervision is defined as student supervision by a qualified staff radiographer who:

- reviews the procedure in relation to the student's level of competency
- evaluates the condition of the patient in relation to the student's knowledge
- determines the capability of the student to assist in performing the examination
- is physically present during the conduct of the procedure
- reviews and approves the procedure and/or image, and
- submits all digital examinations into PACS

All repeat images must be performed according to the Repeat Image Policy. (Must be done by the technologist).

Students must be directly supervised until competency is achieved.

# 11D. Indirect Supervision (Level 2)

Indirect supervision is defined as student supervision by a licensed staff radiographer who:

- reviews the procedure in relation to the student's level of competency
- evaluates the condition of the patient in relation to the student's knowledge
- determines the capability of the student to perform the examination with reasonable success
- is immediately available to assist students regardless of the level of student achievement
- reviews and approves the procedure and/or image, and
- submits all digital examinations into PACS

"Immediately available" is interpreted as the physical presence of a licensed staff radiographer adjacent to the room or immediate vicinity where a radiographic procedure is being performed.

All repeat images must be performed according to the Repeat Image Policy. (Must be done by the technologist).

Students must be indirectly supervised even after competency is achieved.

## 11E. Repeat Image Policy

The presence of a qualified radiographer during the repeat of an unsatisfactory image assures patient safety and proper educational practices. A qualified staff radiographer must be physically present during the conduct of a repeat image and must approve the student's procedure prior to re-exposure.

When the student is working with indirect supervision, all repeat images must be performed under the direct supervision of a licensed staff radiographer.

When the student is working with direct supervision, all repeat images must be performed by a <u>licensed</u> staff radiographer.

# 11F. Pediatric Policy

All radiographic examinations of children under the age of 6 must be done under the <u>direct supervision</u> of a qualified staff radiographer regardless of the student's competency level.

# 11G. PACS Submission Policy

The verification and submission of all digital examinations into PACS is the <u>legal responsibility of a qualified staff radiographer</u> regardless of the student's level of achievement.

# 12. CLINICAL SUPERVISION REQUIREMENTS BY SEMESTER

The following synopsis should be used to determine the students' capabilities for each clinical course: (See competency categories, pg. 29)

# Clinical Radiography I - SPRING

The first three weeks of this clinical course is primarily *observation only*. After this initial period the following applies:

Restricted Areas - Operating Room, C-Arm,

Special Procedures, CT, MRI, Bone Density, Mammography

Observation - category E – Contrast Media Studies

category F – Skull, Mobile Radiography

Direct Supervision - category A – Upper Extremities

category B – Lower Extremities category C – Spine/Pelvis

category D – Routine Abdomen, Routine Chest

or AP Chest non-bucky (wheelchair/stretcher)

category G – Pediatric (Age 6 or younger)

Indirect Supervision -

#### **After Testing Competent:**

category D – Routine Abdomen, Routine Chest

or AP Chest non-bucky (wheelchair/stretcher)

# Clinical Radiography II – SUMMER

Restricted Areas - O.R., C-Arm, Special Procedures, CT., MRI,

Bone Density, Mammography

Observation - category E – Contrast Media Studies

category F – Skull, Mobile Radiography

Direct Supervision - category A – Upper Extremities

category B – Lower Extremities

category C – Spine/Pelvis

category D - Chest/ Abdomen

category E – Contrast Media Studies category F – Mobile Radiography

category G – Pediatric (Age 6 or younger)

*Indirect Supervision -* **After Testing Competent**:

category A – Upper Extremities category B – Lower Extremities

category C – Spine/Pelvis

category D – Routine Abdomen, Routine Chest

or AP Chest non-bucky (wheelchair/stretcher)

# Clinical Radiography III - FALL

Restricted Areas - Special Procedures, CT, MRI, Bone Density, Mammography

*Observation -* O.R., C-Arm

Direct Supervision - category E – Contrast Media Studies, C-Arm, O.R.

category F – Skull, Mobile Radiography category G – Pediatric (Age 6 or younger)

*Indirect Supervision -* **After Testing Competent**:

category A – Upper Extremities category B – Lower Extremities

category C – Spine/Pelvis

category D – Routine Abdomen, Routine Chest

or AP Chest non-bucky

# Clinical Radiography IV - SPRING

Restricted Areas - Mammography

Observation only- Special Procedures, CT., MRI and Bone Density

Direct Supervision - category E - Contrast Media Studies, C-Arm, O.R.

category F –Skull, Mobile Radiography category G – Pediatric (Age 6 or younger)

*Indirect Supervision -* **After Testing Competent**:

category A – Upper Extremities category B – Lower Extremities category C – Spine/Pelvis

category D – Routine Abdomen, Routine Chest

or AP Chest non-bucky (wheelchair/stretcher)

Skull (after completing lab competency)

# Clinical Radiography V – SUMMER

Restricted Areas - Mammography

Observation only - Special Procedures, CT, MRI and Bone Density

Direct Supervision - category E – Contrast Media Studies, C-Arm, O.R.

category F – Skull, Mobile Radiography category G – Pediatric (Age 6 or younger)

*Indirect Supervision -* **After Testing Competent**:

category A – Upper Extremities category B – Lower Extremities category C – Spine/Pelvis

category D – Routine Abdomen, Routine Chest

or AP Chest non-bucky (wheelchair/stretcher)

Skull (after completing lab competency)

#### 13. CLINICAL COURSE OUTLINES

Please read the objectives for each course and the categories for direct and indirect supervision. These categories indicate the examinations you may perform each semester and the level of supervision required. It is your responsibility to know, and adhere to, this information.

If you are asked to perform an examination that has not been covered in class, you are to indicate this to the technologist. You are not permitted to perform any examination until the content material has been taught at the college. If a problem arises, speak to your clinical supervisor or clinical instructor immediately.

#### 14. CLINICAL GRADES

The first week of each semester, the Clinical Coordinator will review the course syllabi with the class.

Carefully review the grading criteria for each clinical course.

At the end of each semester, the clinical grades are computed by the Clinical Coordinator using the appropriate student evaluation forms. (See: Clinical Evaluation Forms, Appendix C). Grades are determined by evaluating the following categories:

- 1. Professionalism
- 2. Following Instructions
- 3. Communication Skills
- 4. Positioning Skills
- 5. Computing Technique
- 6. Radiation Protection
- 7. Knowledge of Equipment
- 8. Patient Care
- 9. Image Analysis and Clinical Assignment
- 10. Punctuality
- 11. Attendance
- 12. Completion of Clinical Competencies
- 13. Clinical Supervisor Overall Impression
- 14. Clinical Instructor Overall Impression
- 15. Clinical Coordinator Overall Impression

The clinical supervisor and clinical instructor at each affiliate complete a clinical evaluation form for each student. The clinical coordinator will complete his own evaluation form and will combine the information from these evaluation forms with the attendance records and performance in image analysis class to assign a clinical grade. A clinical grade is given for each semester. Clinical grading criteria are contained within each of the clinical course outlines. Students will be given the opportunity to review their evaluations.

#### 15. CLINICAL COMPETENCY PROGRAM

The Clinical Competency Program is designed to allow students to apply theoretical principles of radiography in practical settings.

(See: Clinical Competency, Appendix D)

These practical experiences take place with varying degrees of supervision. The degree of supervision is determined by an ongoing system of clinical assessments. The goal of the Clinical Competency Program is to assist student radiographers in attaining competency -- a state whereby students combine and apply knowledge and clinical skills without error and without direct supervision.

The Clinical Competency Program is based on a progression of clinical evaluations designed to assure that graduates meet the clinical education objectives of the program.

# 15A. Competency Examinations & Categories

There are mandatory hospital-based competencies that must be completed during the five clinical courses. The Program's certifying agency, The American Registry of Radiologic Technologists (ARRT) mandates these competencies must be completed before a student may challenge the national certification examination.

Students are not permitted to do any of the mandated clinical competency examinations, until they complete the *pre-requisite*: **Equipment Manipulation Competency**. In addition, students must complete the *requisite* competency: **Basic Medical Techniques**, before the completion of Clinical Radiography II.

# **Competency Categories**

Category A	Category B	Category C
Upper Extremities	Lower Extremities	Spine/Pelvis
1. Finger/Thumb	1. Foot	1. Cervical Spine (non-trauma)
2. Hand	2. Ankle	2. Thoracic Spine
3. Wrist	3. Knee	3. Lumbar Spine
4. Forearm	4. Tibia/Fibula	4. Pelvis
5. Elbow	5. Femur	5. Hip
6. Humerus	6. Lower Extremity (trauma)	
7. Shoulder (non-trauma)		
8. Shoulder (trauma)		
9. Upper Extremity (trauma	a-nonshoulder)	

The student will move from direct to indirect supervision when he/she completes each examination.

Category D	Category E
Chest/Abdomen	Contrast
1. Routine Chest	1. U.G.I. Series or BE
2. AP chest non-bucky (wheelchair/stretcher)	2. C-Arm (orthopedic)
3. Routine Advanced Chest	
4. Routine Supine Abdomen	
5. Abdomen (erect)	

The student will move from direct to indirect supervision when he/she completes each examination.

**Direct Supervision Only** 

Category F
Portable
1. Chest
2. Abdomen
3. Extremity

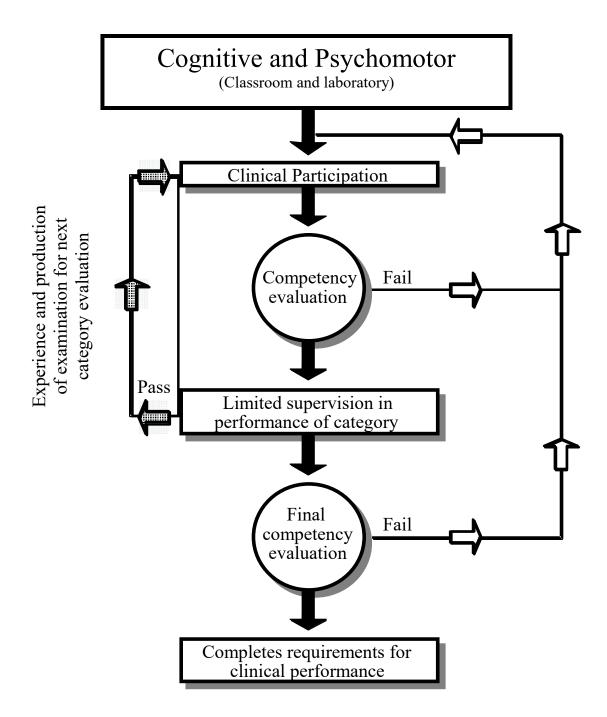
The student must always work with direct supervision for category F, Portables.

# 15B. Unsatisfactory Competency Procedure

If a student fails a competency evaluation, he/she will be required to complete the Student Self-Assessment – Unsatisfactory Clinical Competency Evaluation Form and practice this exam once more before attempting to redo exam.

(See Appendix D6)

# 15C. Competency-Based Clinical Education Flow Chart



# 15D. Clinical Participation

Clinical participation has both laboratory and hospital components. To assure meaningful clinical participation, the students will have mastered cognitive competencies necessary to assure a meaningful clinical participation phase.

During the first semester of the program students participate in simulated clinical activities in the college laboratory. These activities include:

- 1. **DEMONSTRATION** the student is shown the radiographic positions in both lecture and laboratory.
- 2. **PRACTICE** combining knowledge and clinical skills, the students engage in clinically related activities in the laboratory. These activities include laboratory assignments within the formal positioning course as well as other assignments that are completed in open labs. (OPEN LABS the laboratory is available between classes and in the evening. Students work under the direct supervision of the college laboratory technologist, who is a registered radiologic technologist.)

During the second semester students begin their hospital experience. This experience takes the form of five (5) separate clinical courses. Each of these courses has specific course outlines and objectives. Clinical experience at the hospital is accomplished in three progressive modes:

- 1. OBSERVATION
- 2. DIRECT SUPERVISION
- 3. INDIRECT SUPERVISION

#### 15E. Clinical Assessment Procedures

The demonstration mode is completed when the instructor teaches and illustrates the positions for each examination.

The lab practice mode takes place within the positioning laboratory and with assignments that are completed in open labs.

The pre-clinical assessment is a practical examination that students must complete prior to beginning their hospital practicum.

The clinical practice mode takes place at affiliate hospitals. Students perform this practice mode with either direct or indirect supervision.

# 15F. Equipment Manipulation Competency

# **Assessment Objectives**

Before Clinical Competency may be performed, the student must demonstrate appropriate knowledge of how to use general radiographic equipment. The student <u>must</u> pass all items listed on the "Equipment Manipulation Competency Evaluation".

#### The student will:

- 1. Locate the main power on/off switch.
- 2. Turn the control console power on/off.
- 3. Identify the location and turn on/off the following electro-mechanical locks:
  - a. Vertical Lock
  - b. Horizontal Lock
  - c. Transverse Lock
  - d. Angulation Lock
  - e. Rotation Lock
  - f. Centering Lock
- 4. Center the overhead tube to the table bucky grid tray using the appropriate SID.
- 5. Center the overhead tube to the wall bucky grid tray using the appropriate SID.
- 6. Position the overhead tube for a routine PA hand examination.

See Appendix D2 for the Equipment Competency form.

# 15G. Clinical Competency Objectives

The purpose of the clinical competency evaluation is to assess the students' ability to meet the following objectives:

- 1. Equipment Manipulation
- 2. Basic Medical Procedures
- 3. Technical Factors
- 4. Positioning Skills
- 5. Radiation Protection
- 6. Image Evaluation
- 7. Student Patient Interaction
- 8. Patient Transfer
- 9. Patient Care

Clinical competency evaluations assess the students' ability to meet clinical education objectives. Evaluations are graded on a pass/fail basis. Clinical competency requirements designated in each clinical course are considered to be the minimum criteria for successfully completing the clinical course.

# 15H. Clinical Competency Assessment

Students are required to meet particular competency requirements for each semester. Students who do not complete the minimum number of competencies will have points deducted from their clinical grade.

# 15I. Hospital Tested Competencies - by Semester

Students are required to perform the following mandatory competency examinations at their clinical education center. The competencies required each semester are the **minimum** number necessary to receive **full** credit towards their clinical grade.

#### FIRST YEAR:

## Clinical Radiography 1

No competencies can be performed until the student successfully completes the equipment manipulation competency. A minimum of four exams indicated below must be completed under the direct supervision of the Clinical Instructor or Clinical Coordinator.

The clinical grade is only based upon completing the required minimum exams.

- Equipment Manipulation
- Basic Medical Technique
- Routine chest
- Upper or lower extremity

## The student may perform one additional exam.

## Clinical Radiography 2

The student must perform a minimum of 8 exams. The student may perform additional exams; however, the grade is based upon completing the 8 required exams.

- Basic Medical Techniques (If not completed during Clinical Radiography I)
- Two (2) Upper extremities
- Two (2) Lower extremities
- Two (2) Spine or 1 Spine and 1 Pelvis
- One (1) Routine abdomen
- One (1) Portable (Direct Supervision)

SECOND YEAR: (Spot comps will be done by clinical coordinator or clinical instructors).

## Clinical Radiography 3

The student will perform a minimum of 8 additional exams (see page 23). The student may perform additional exams; however, the grade is based upon completing the 8 required exams.

### Clinical Radiography 4

The student will perform a minimum of 8 additional exams (see page 24). The student may perform additional exams; however, the grade is based upon completing the 8 required exams.

## Clinical Radiography 5

The student will perform four (4) additional exams (see page 24) for a total of 32 completed competency examinations.

## **PLEASE NOTE:**

At any point during the clinical component of the program, a student may be retested by the clinical coordinator on any exam they have been deemed competent. (Please see 15B, page 27)

## 15J. Laboratory Competencies

In addition to the hospital-based competencies, the following mandated competencies will be simulated in the college laboratory.

- 1. Routine Skull
- 2. Zygomatic Arches
- 3. Mandible
- 4. Orbits
- 5. Facial Bones
- 6. Nasal Bones
- 7. Paranasal Sinuses
- 8. Cervical Spine trauma
- 9. Sacrum/Coccyx
- 10. Scapula
- 11. Sternum
- 12. Clavicle
- 13. Ribs
- 14. S.I. Joints
- 15. Hip Trauma
- 16. Pediatric Chest
- 17. Esophogram
- 18. Os Calcis
- 19. Patella
- 20. Toes
- 21. AC Joints

## 16. CLINICAL OBJECTIVES FOR ELECTIVE ROTATIONS

The appropriate role for the student technologist during elective rotations is to observe and/or assist during these rotations. The following is a list of clinical objectives for the elective rotations of Special Procedures, Computerized Tomography (CT), Magnetic Resonance Imaging (MRI) and Mammography.

## 16A. Interventional Procedures

## The Student Will:

- 1. Demonstrate the ability to assist in the appropriate transport and transfer of patients.
- 2. Observe and/or assist in the positioning of the patient and preparation of auxiliary imaging equipment.
- 3. Observe and/or assist in the preparation of the power injector (if needed).
- 4. Observe and/or assist with the selection of proper technical factors.
- 5. Assist in providing adequate radiation protection for patient and personnel.
- 6. Evaluate the radiographic quality of the examination and describe related anatomy and pathology.

## **16B.** Computerized Tomography (CT)

## The Student Will:

- 1. Demonstrate the ability to assist in the proper transport and transfer of the patient.
- 2. Observe and/or assist in the positioning for various CT examinations
- 3. Observe and/or assist in the selection of proper technical factors and programming requirements for the examination.
- 4. Assist in providing adequate radiation protection for the patient and personnel.
- 5. Identify cross-sectional anatomical structures.

## 16C. Magnetic Resonance Imaging (MRI)

All students must complete MR safety screening before rotating through MRI.

## The Student Will:

- 1. Demonstrate the ability to assist in the proper transport and transfer of the patient.
- 2. Observe and/or assist in the positioning for various MRI studies.
- 3. Observe and/or assist in the selection of proper technical factors and programming requirements for the examination.
- 4. Assist in providing adequate sceening for the patient and personnel.
- 5. Identify cross-sectional anatomical structures.

## 16D. Bone Density

### The Student Will:

- 1. Demonstrate the ability to assist in the proper transport and transfer of the patient.
- 2. Observe and/or assist in the positioning of the patient.
- 3. Observe and/or assist in the selection of proper technical factors and programming requirements for the examination.
- 4. Assist in providing adequate screening for the patient and personnel.
- 5. Identify anatomical structures.
- 6. Observe and or assist in Quality Control testing.

Laboratory-Tested

Competency

Forms

Hostos Community College - Radiologic Technology Program

# **LABORATORY COMPETENCY**

# **WORKBOOK**

**Assignment 1:** Category 2: Upper & Lower Extremities

**Assignment 2:** Category 3: Thorax & Vertebral Column

**Assignment 3:** Category 4: Skull

## LABORATORY COMPETENCY EVALUATION CRITERIA

## 1. EQUIPMENT MANIPULATION:

- a. Adequately manipulate locks and/or bucky grid
- b. Position tube properly
- c. Identify image with appropriate markers

## 2. TECHNICAL FACTORS:

- a. Measure patient correctly
- b. Select appropriate exposure factors (kVp, mAs & FFD)
- c. Select correct technical factors (image receptor & grid)

## 3. POSITIONING SKILLS:

- a. Position patient correctly & select appropriate image receptor size
- b. Center anatomical area of interest to image receptor
- c. Align central ray to image receptor
- d. Use immobilizing devices correctly
- e. Instruct patient properly

### 4. RADIATION PROTECTION:

- a. Collimate beam properly
- b. Shield patient correctly

### 5. IMAGE ANALYSIS:

- a. Evaluate radiograph for visibility and sharpness
- b. Evaluate radiograph for proper positioning

Students must meet all evaluation criteria to successfully complete the Competency Evaluation.

Laboratory Competency Evaluation is computed as a **full clinical assignment** day. All policies concerning attendance and punctuality apply. Students must report to the College Laboratory at the designated time and date.

Hostos Community College – Radiologic Technology Program

**Lab Competency Worksheet 1** 

# **Category 2 Examinations**

Name:										
Upper Extre	Upper Extremities									
Anatomy	Projection	Pass	Fail	Projection	Pass	Fail	Projection	Pass	Fail	
Thumb	PA			Lateral						
Hand	PA			Lateral			PA oblique			
Wrist	PA			Lateral			PA oblique			
Forearm	AP			Lateral						
Elbow	AP			Lateral						
Humerus	AP		П	Lateral						
Lower Extre	emities									
Anatomy	Projection	Pass	Fail	Projection	Pass	Fail	Projection	Pass	Fail	
Foot	AP axial			Lateral			AP oblique			
Ankle	AP			Lateral			AP oblique			
Alikie	AP oblique	(Mo	ortise	projection)						
Calcaneus	Axial									
Leg	AP			Lateral						
Knee	AP			Lateral						
Patella	Tangential	(Set	tegasi	method)						
Hip	AP			Axiolateral	(Da	nelius	s-Miller method)			
All projections successfully completed All failed projections must be repeated										
Evaluator:	Evaluator: Date									
Comments:										
• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • •	• • • • • • •	• • • • • • • • • • • • • • • • • • • •	• • • • • • • •	• • • • • • • •	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	• • • • •	

Hostos Community College – Radiologic Technology Program

# Lab Competency Worksheet 2 Category 3 Examinations

Name:			•••••			
Bony Thor	ах					
Anatomy	Projection	Pass	Fail	Projection	Pass	Fail
Shoulder	AP, internal rotation			AP, external rotation		
Scapula	AP			Lateral, erect		
Clavicle	AP			AP axial		
Ribs	AP			AP oblique (RPO or LPO)		
Sternum	PA oblique (RAO)			Lateral, erect		
Simulated	Exams					
Anatomy	Projection	Pass	Fail	Projection	Pass	Fail
Pediatric Chest	PA			Lateral, erect		
Esophagus	PA oblique (RAO)			PA oblique (LAO)		
Vertebral Column						
_						
Anatomy	•	Pass	Fail	Projection	Pass	
Anatomy Cervical Spine	AP axial			Lateral, erect		
Cervical Spine	AP axial PA axial oblique (RAO or LAO)			Lateral, erect Lateral, horizontal beam		
	AP axial PA axial oblique (RAO or LAO) AP			Lateral, erect Lateral, horizontal beam Lateral		
Cervical Spine	AP axial PA axial oblique (RAO or LAO) AP AP			Lateral, erect Lateral, horizontal beam Lateral Lateral		
Cervical Spine Thoracic Spine Lumbar Spine	AP axial PA axial oblique (RAO or LAO) AP AP AP oblique (RPO or LPO)			Lateral, erect Lateral, horizontal beam Lateral Lateral Lateral Lateral L5/S1		
Cervical Spine Thoracic Spine Lumbar Spine Sacrum	AP axial PA axial oblique (RAO or LAO) AP AP AP oblique (RPO or LPO) AP			Lateral, erect Lateral, horizontal beam Lateral Lateral		
Cervical Spine Thoracic Spine Lumbar Spine Sacrum Coccyx	AP axial PA axial oblique (RAO or LAO) AP AP AP oblique (RPO or LPO) AP AP			Lateral, erect Lateral, horizontal beam Lateral Lateral Lateral Lateral L5/S1		
Cervical Spine Thoracic Spine Lumbar Spine Sacrum Coccyx Pelvis	AP axial PA axial oblique (RAO or LAO) AP AP AP oblique (RPO or LPO) AP AP			Lateral, erect Lateral, horizontal beam Lateral Lateral Lateral Lateral L5/S1		
Cervical Spine Thoracic Spine Lumbar Spine Sacrum Coccyx Pelvis S.I. Joints  All projection	AP axial PA axial oblique (RAO or LAO) AP AP AP oblique (RPO or LPO) AP AP			Lateral, erect Lateral, horizontal beam Lateral Lateral Lateral Lateral L5/S1	ated	

Hostos Community College – Radiologic Technology Program

# Lab Competency Worksheet 3 Category 4 Examinations

Name:								
Routine	Skull							
Projection		Pass	Fail	Projection	Pass	Fail		
PA	(Perpendicular method)			Lateral (Right or Left)				
AP axial	(Towne method)			Submentovertical (Schüller method)				
Routine	Paranasal Sinus	es						
Projection	(0.11 11.150 1.1)	Pass	Fail	Projection	Pass	Fail		
	(Caldwell 15° method)			Lateral (Right or Left)				
Parietoacanth	iial (Waters method)			Submentovertical (SMV)				
Facial B	ones							
Anatomy	Projection		Pa	ss Fail Projection	Pass	Fail		
Facial bones	Modified parietoacanth	nial	(1	Modified Waters method)				
Nasal bones	Right lateral			☐ Left lateral				
Mandible	PA			I □ Axiolateral oblique				
T.M.J.	AP axial		(1	Modified Towne method)				
	Axiolateral oblique		(1	Modified Law method)				
Zygomatic	Submentovertical (SM	IV)		Oblique inferosuperior (Tange	ntial)□			
Orbits	Parietoorbital oblique		(I	Rhese method)				
All proje	All projections successfully completed  All failed projections must be repeated							
Evaluator:				Date				
Comments:						•••••		
•••••		•••••	• • • • • • • • • • • • • • • • • • • •		•••••	•••••		

# Lab Competency Worksheet 4 Repeated Projections

lame:			••••••••••	•••••
Anatomy	Projection	Method	Pass	Fail
	ccessfully completed	All failed projections		
/aiuator:		Date	•••••••	• • • • • • •
omments:				
				•••••

# APPENDIX B

# Clinical Record Keeping

Forms

## **Clinical Handbook**

# **Education Agreement**

ı,	nereby acknowleage:							
´ =	PRINT STUDENT'S NAME							
1.	I have received a copy of the Radiologic Technology Program's Clinical Handbook; and, I have carefully read and understand the policies and procedures of the program.							
2.	I have carefully read and understand the "clinical objectives" contained in the Radiologic Technology Program's Clinical Handbook.							
3.	I have carefully read and understand the "clinical education rules and regulations",6 and 6A, numbers one (1) through twenty two (21).							
4.	I have carefully read and understand the "clinical attendance policy" numbers 6B, "clinical probation and dismissal policies" number 6C, and "substance abuse policy" number 6D.							
5.	I have carefully read and understand the "levels of clinical supervision" number 12 through 12D and will strictly adhere to this policy.							
 <b>I,</b> _	hereby grant:  PRINT STUDENT'S NAME							
1.	Hostos Community College's Radiologic Technology faculty permission to send for, or share, any information they consider necessary and appropriate to verify my personal, academic, medical and/or legal records.							
2.	Permission for my file to be examined as part of the routine accreditation review proceedings.							
= I h	ereby affirm all of the above statements.							
Stu	ndent's Signature: Date:							
Sw	orn to before me this day of 20							
No	tary's Signature:							

**Excess Clinical Lateness Notice** 

Hostos Community College - Radiologic Technology Program

TO:		
FROM:	(Clinical Coordinator)	
DATE:		
RE:	Lateness	
	According to the attend	ance records at:
		you were late on the
following	three days:	
accrued al		ence; therefore, one additional day will be added to your As of today, you now have day(s), which must es.
Comments:		
I have reviewe	ed the above information and understa	and that this notification will be placed in my permanent student file.
S1	tudent's Signature	Clinical Coordinator's Signature

Hostos Community College - Radiologic Technology Program

# **Excess Clinical Absence Notice**

Date:

Student name:
According to the attendance records at:
You were absent on the following days:
You have exceeded the number of absences permitted for this semester by day(s). Therefore, you must submit documentation for all future excess absences.
According to the Clinical Handbook: If a student exceeds the number of allowable absences for a clinical course, a five point grade deduction will occur for each day beyond the allowable absences. The student will also be placed on clinical probation. Please refer to the Clinical Handbook, page 7, #6B.2.
(See: Radiologic Technology Program Clinical Handbook for additional details.)
Please Note: Excess absences may result in disciplinary action.
Comments:
Clinical Coordinator's Signature
I have reviewed the above information and understand that this notification will be placed in my permanent student file.
Student's Signature

# APPENDIX C

Clinical Evaluation

Forms

## ostos Community College – Radiologic Technology Program

# **Mid-Semester Clinical Evaluation**

Stud	udent: Date:				
Hosj	PLEASE NOTE  Categories 4. 5. and 7 are not applicable for Clinical Radiography 1 only	٧			
Eval	uator:				
	PLEASE NOTE  Categories 4, 5, and 7 are not applicable for Clinical Radiograph	hy 1 on	ıly.		
	ease indicate your rating of the above student each category listed below:	Good	Satisfactory	Needs Improvement	Does Not Apply
	Overall Impression Clinical evaluator's impression of the student's progress throughout the semester				
1.	Professionalism Student's conduct in dealing with supervisors, technologists and patients				
2.	Following Instructions Student's ability to take and follow direction				
3.	Communication Skills Student's ability to verbally communicate with supervisors, technologists and patients				
4.	Positioning Skills Student's ability to position patients correctly				
5.	Computing Technique  A. Student's ability to compute appropriate exposure factors				
	B. Adapt factors for various patient conditions				
6.	Radiation Protection Student's adherence to radiation protection procedures and protocol.				
7.	Knowledge of Equipment Student's knowledge of equipment and their proper utilization				
8.	Patient Care Student's ability to assess the patient's needs in order to complete the exam				

			:	
Please indicate your rating of this studen for each category listed below:	nt		se explain bel	Needs Improvement
A. <u>Clinical Competency Policy</u> Student's adherence to the college's direct and indirect	supervision leve	ls		
B. Appearance Student's adherence to the program's professional dress	s code			
C. <u>Dependability</u> Student's willingness to perform tasks within his or her	abilities			
Please explain any needs improvement items below:				
Have there been any incidents of clinical misconduct?	No	Yes, please ex	plain bel	low
Have there been any incidents where the student did NOT follow the correct patient identification procedures?	No	Yes, please ex	plain bel	low
Have there been any incidents where the student did NOT correctly perform and/or label an examination?	explain below			
Describe the student's clinical strengths:				
What could the student have done to improve his or her clinic	cal performance?			
Additional Comments:				
□ NO COMMENTS	Clinical Evalu	uator's Signature		
Student's Comments:				
□ NO COMMENTS				

Hostos Community College – Radiologic Technology Program

Student's Signature

# **Final Clinical Evaluation**

Clinical Supervisor / Clinical Instructor

Stud	ent:	Date:											
Hosp	oital:	Clinical 1	Radiogra	phy:	II	III IN	/ V						
	uator: se Print)		[	Supe	rvisor		tructor						
		Excellent	9% accura 9% accura	cy									
		indicate your rating of the above student n category listed below:	Excellent	Good	Satisfactory	Needs Improvement	Fail						
(		Il Impression Il evaluator's impression of the student's progress throughout nester	4	3	2	1	0						
1.		essionalism ent's conduct in dealing with supervisors, technologists and ents											
2.		owing Instructions ent's ability to take and follow direction											
3.	Stude	ent's ability to verbally communicate with supervisors, sologists and patients											
4.		tioning Skills ent's ability to position patients correctly											
5.	Con	puting Technique											
	A. St	udent's ability to compute appropriate exposure factors											
	B. A	dapt factors for various patient conditions											
6.		ent's adherence to radiation protection procedures and protocol.											
7.		wledge of Equipment ent's knowledge of equipment and their proper utilization											
8.		ent Care ent's ability to assess the patient's needs in order to complete xam											
		indicate your rating of this student n category listed below:				Satisfactory	Needs Improvement						

A.	Clinical Competency Policy Student's adherence to the college's direct and indirect	supervision leve	els						
B. Appearance Student's adherence to the program's professional dress code									
C.	<u>Dependability</u> Student's willingness to perform tasks within his or her								
Plea	se explain any needs improvement items below:								
Have	e there been any incidents of clinical misconduct?	No	Yes, please explain below						
Have there been any incidents where the student did NOT follow the correct patient identification procedures?  No Yes, please explain below									
	e there been any incidents where the student did NOT ectly perform and/or label an examination?	No	Yes, please explain below						
Desc	eribe the student's clinical strengths:								
Wha	t could the student have done to improve his or her clinic	cal performance	?						
Add	itional Comments:								
□ N	□ NO COMMENTS  Clinical Evaluator's Signature								
Stud	dent's Comments:								
□ N	IO COMMENTS	Ot al	t's Cignoture						
		Studen	t's Signature						

# **Final Clinical Evaluation**

**Clinical Coordinator** 

Studen	Date:										
Hospit		al Radio	graphy:	1 1	l III	IV V					
	Excellent	9% accura 9% accura	cy								
	se indicate your rating of the above student each category listed below:	F Excellent	<b>9000</b>	∾ Satisfactory	Needs Improvement	o Fail					
Cl	verall Impression linical evaluator's impression of the student's progress throughout e semester										
	Professionalism Student's conduct in dealing with supervisors, technologists and patients										
	Following Instructions Student's ability to take and follow direction										
	Communication Skills Student's ability to verbally communicate with supervisors, technologists and patients										
	Positioning Skills Student's ability to position patients correctly										
	Computing Technique A. Student's ability to compute appropriate exposure factors										
	B. Adapt factors for various patient conditions										
	Radiation Protection Student's adherence to radiation protection procedures and protocol										
	Knowledge of Equipment Student's knowledge of equipment and their proper utilization										
•	Patient Care Student's ability to assess the patient's needs in order to complete the exam										
	Image Analysis and Clinical Assignments Student's performance in image analysis classes and other clinical										

assignments

Deductions to the Clinical Grade:									
	A	Exceeded the allowable number of absences by: 1 2 3 4	_						
	В	Insufficient number of competencies completed:%							
	C	Failed to sign the monthly dosimetry report within the appropriate to	ime (-1)						
	D	Failed to return the film badge by the 15th of the month	(-2)						
	E	Lost the film badge due to negligence or not wearing dosimeter	(-5)						
	F	Clinical misconduct; violated a stated clinical policy or procedure; received a suspension from the hospital for days	_						
	G	Failed to follow the correct patient identification procedure; but, brought the right patient into the exam room; no exposures made	(-1)						
	Н	Failed to follow the correct patient identification procedure; brought the wrong patient into the exam room; no exposures made	(-5)						
	I	No markers visible on the radiograph/image receptor	(-1)						
	J	Incorrect placement of L/R markers on the radiograph/image recept	or (-3)						
	K	Performed the wrong view or routine on the patient	(-5)						
	L	Performed the wrong exam on the patient	(-10)						
	M	Digitally linked the wrong patient data with the exam	(-25)						
Ple	Please explain any checked items below:								
Add	Additional Comments:								
□ NO COMMENTS  Clinical Coordinator's Signature									
Stu	dent	t's Comments:							
	□ NO COMMENTS								
		Studen	t's Signature						

# APPENDIX D

Clinical Forms

Hostos Community College – Radiologic Technology Program

# Student Evaluation Equipment Manipulation Competency

Name	Evaluator			
Hospital Date				
Room/Equipment		·	·•	
		<u>Pass</u>	<u>Fail</u>	<u>N/A</u>
1. Locate the main power on/off switch.				
2. Turn the control console power on/off.				
3. Identify the location and turn on/off the follo	wing basic locks:			
a. Vertical Lock				
b. Horizontal Lock				
c. Transverse Lock				
d. Angulation Lock				
e. Rotation Lock				
f. Centering Lock				
4. Identify the location and engage (on) and disclocks not listed above.	engage (off) any of the			
5. Position the overhead tube for a routine PA h	and examination.			
6. Center the overhead tube to the table bucky gabdominal study.	grid tray for a routine			
7. Center the overhead tube to the wall bucky g abdominal study.	, ,			
STUDENTS MUS	ST PASS ALL ITEMS	<u>S</u>		
Student Signa	ature			
Evaluator's S	ignature			

COMMENTS:		

## Hostos Community College – Radiologic Technology Program

# **Clinical Competency Evaluation**

Stuc	lent:				Pass	ed		Failed	**
Hospital:					Evaluator: (Please Print)				
Mod	de of Transport:	ort: Ambulatory Wheelchair		Stretcher	Date:				
Exa	mination:				Trauma St	udy?	Yes	<b>;</b>	No
Path	nology:								
Proj	jections:	1)	2)	3)	Category:	A	ВС	D	E F
		has performed lenging this co		hree (3) exams ι	ınder <u>DIR</u>	ECT	SUPE	RVISIO	<u>NC</u>
	Prior to chair	chynny una col	iipeterioy.						γĮd
Ρl	ease indica	ite vour ratir	ng of the abo	ove student		Satisfactory	Needs Improvement		Does Not Apply
		gory listed k	•	, to stauciit	Good	Satisf	Needs Impro	Fail	Does
a					3	2	1	0	-
1.	Equipment N								
		_	ocks, bucky and/o	r grid					
		e tube properly	• .						
	c. Identify the	e image with the a	ppropriate marker	'S					
2.	Technical Fa	<u>ictors</u>						···•	
		•	appropriate expos	sure factors					
	b. Select the	appropriate techni	cal factors:	image receptor and grid	1 🗌				
3.	<b>Positioning</b>	<u>Skills</u>							
	a. Position th	e patient correctly	and select approp	oriate field size					
	b. Center the	anatomical area o	f interest to the im	nage receptor					
	c. Align the c	entral ray to the in	mage receptor						
	d. Use immol	pilization devices	correctly, if applic	cable					n/a
	e. Instruct the	e patient correctly							
4.	Radiation Pr	<u>otection</u>							
		the beam properly	,						
		patient correctly							
	c. Evaluate th	ne exposure index	information, if ap	plicable					n/a

Student must successfully complete all items to receive a passing grade.

\*\* Form 025 Unsatisfactory Clinical Competency Evaluation must be completed.

	ease indicate your rating of this student each category listed below:	Good	Satisfactory	Needs Improvement	Fail	Does Not Apply
_	I PI	3	2	1	0	
5.	Image Evaluation					
	<ul><li>a. Evaluate the image for visibility and sharpness</li><li>b. Evaluate the image for proper positioning</li></ul>					
	c. Identify the rationale for the study					
	d. Identify relevant anatomy					
6.	Student-Patient Interaction					
<b>U.</b>	a. Correlate the patient identification with the requisition	П				
	b. Assist and interact professionally with the patient					
	c. Insure patient privacy and modesty					
	d. Communicate effectively with the patient					
7.	Patient Transfer					<u> </u>
	a. Student transferred the patient properly and safely	П				n/a
	b. Student utilized proper body mechanics					
8.	Patient Care			.i		<u>i</u>
	a. Student maintains standard precautions		П			
	b. Student provides effective patient care					
	c. Student utilizes appropriate hand-washing techniques					
Eva	Please explain any item receiving a failir	ng gra	ide b	elow		
	NO COMMENTS  Clinical Evalu	uator's	Signa	iture		
Stu	dent's Comments:					
1	NO COMMENTSStudent	's Sian	ature			

# Hostos Community College - Radiologic Technology Program

# **Student Self-Assessment Form**

Student:	Evaluator:	
Hospital:	Date:	
Examination:		
Performance of the examination listed a	above was unsatisfactory. This assignme unnecessary patient exposure. This radio il this assignment has been completed.	ent has been designed to help
Please answer the following questions u	using complete sentences describing in de	etail the following:
1. Why was this examination rated as	unsatisfactory?	
2. Describe the proper positioning for	this exam.	
2. Deserted the proper positioning for		
3. What were the technical factors use	d?	

4.	Identify the patient history and the ra	ationale for the examination.	
5.	What corrective measures do I need	to make to satisfactorily compl	ete this competency?
Stı	ident: Signature	Clinical Coordinator:	Signature
	Print	_	Print

The form must be completed and returned to the Clinical Coordinator within one week.

Hostos Community College – Radiologic Technology Program

# **Basic Medical Techniques**

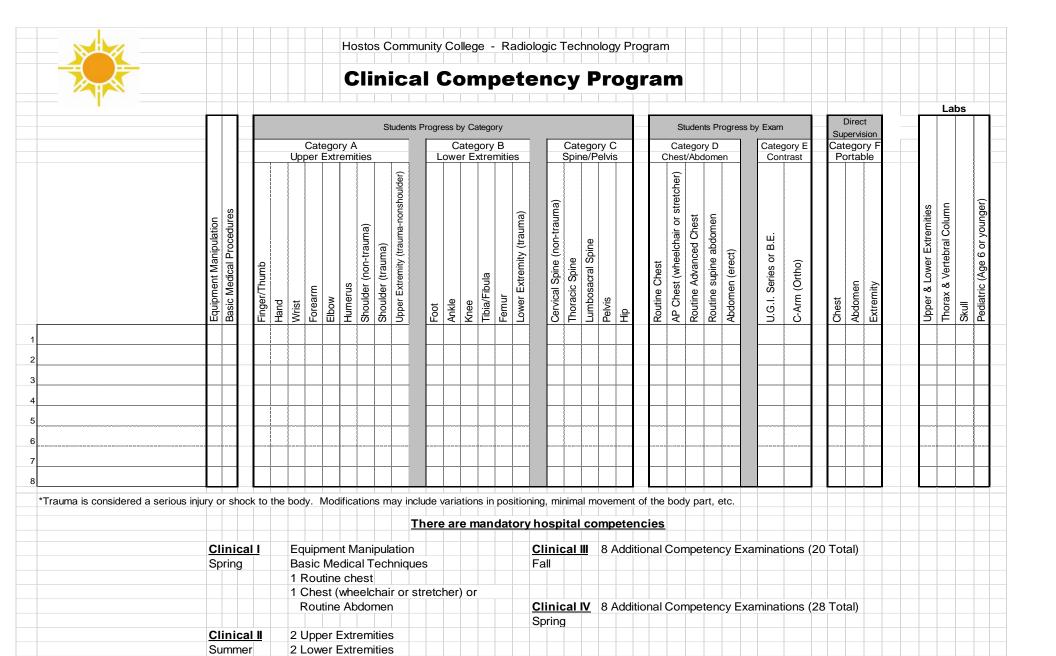
Patient Care Competency Evaluation

Stu	dent:			Date:/		
Ev	aluator :	F				
I.	TECI THE S'	NDARD PRECAUTIONS (ASEPTIC HNIQUE) TUDENT WILL DEMONSTRATE THE USE OF	<b>D</b> A GG	DA W	Competency	
	STANI CONTI	DARD PRECAUTIONS FOR INFECTION ROL.	PASS	FAIL	Completed	
	1.	Utilizes gloves for touching blood/body fluids.			]	
	2.	Identifies that gloves are changed and hands washed after patient contact.			-	
	3.	Identifies the correct use of face masks.				
	4.	Demonstrates the correct use of gowns.				
	5.	Demonstrates the correct way to dispose of hypodermic needles.				
		OD OF ENTERING AND LEAVING AN ISOLATION USING STRICT ISOLATION TECHNIQUES.				
	1.	Identifies the need to remove all jewelry/and wears a cap if hair touches collar.				
	2. 3.	Demonstrates the proper way to wear mask.  Demonstrates hand washing technique			4	
	3. 4.	Demonstrates how to put on gown.			_	
	5.	Demonstrates the proper way to wear gloves.			_	
	6.	Places extra clean gloves on the portable machine.				
	7.	Properly places covered cassette for exposure			-	
	8.	Identifies the need to remove contaminated gloves before making an exposure.			_	
	9.	Demonstrates the removal of the covered cassette to the assistant.				
	10.	Remove contaminated gloves and gown properly.				
	11.	Rewashes hand for 2 minutes without touching handles with bare hands.				
	12. 13.	Demonstrates cleaning the portable machine.  Identifies the need to wash hands again.			_	

## III. MEDICAL EMERGENCIES

THE STUDENT WILL IDENTIFY THE CORRECT ACTION TO TAKE IN AN EMERGENCY INVOLVING A PATIENT FAINTING OR HAVING A CONVULSIVE SEIZURE.

			PASS	FAIL		
	1.	Fainting (Syncope) - demonstrates the correct action when handling a fainting spell.			Competency Completed	
	2.	Convulsive Seizures - demonstrates the correct action when handling a convulsive seizure.				
	3.	Identifies the location of the Emergency Cart.				
	4.	Identifies the proper protocol for medical emergencies.				
Comi	ne	nts:				
				Instructor's Signatur		
				Student's Si	gnature	



Summer

Page 1

Clinical V 4 Additional Competency Examinations (32 Total)

2 Spine/Pelvis

1 Portable

Clinical Narrative 2019

1 Routine Abdomen