

CSUN BS, Radiologic Technology Program
Clinical Competency Assessment for Pediatrics
 (Use one form per competency)

The student must pass all sections of this form. In every section, each student must accumulate the minimum points necessary based on their Junior or Senior/Post Grad status. If a licensed RT intervenes during any part of the evaluation, the assessment is discontinued and the student must be re-evaluated on a different exam. The following total points are needed to pass this competency: Juniors 52 and Seniors/Post Grads 59.

Name: _____ Procedure: _____ Patient's Age: _____

Date of Exam: _____ Patient's Accession/Case #: _____

Scale: 0=Unacceptable; 1=Needs Improvement; 2=Competent/Acceptable; 3=Above Average; 4=Exceeds Expectations (at RT level)

I. Patient Care & Communication									
1. Verifies correct patient, procedure, and clinical diagnosis/indication.	0	1	2	3	4				
2. Communication skills – Provides clear and complete explanation of procedure to age appropriate patient, surname use, etc.	0	1	2	3	4				
3. Obtains patient assessment, preparation, and history.	0	1	2	3	4				
4. Insures patient privacy and dignity.	0	1	2	3	4				
5. Knows emergency protocol for Code situations and contrast reactions.	0	1	2	3	4				
6. Insures patient safety and comfort throughout procedure.	0	1	2	3	4				
7. Practices safe patient care methods including falling precautions.	0	1	2	3	4				
8. Knows how to operate bedside controls and remembers to put side rail up after the exam.	0	1	2	3	4				
9. Assists the patient, physician, nurse, and anesthesiologist throughout procedure.	0	1	2	3	4				
10. Removes unnecessary personnel/family members during exposures.	0	1	2	3	4				
Total for Section I: _____									
Maximum points = 40 Minimum passing points: Juniors=16 and Seniors/Post Grads=18									
II. Technical Requirements & Positioning									
1. Correctly enters patient information.	0	1	2	3	4				
2. Selects appropriate exam protocol or adjusts as necessary.	0	1	2	3	4				
3. Adjusts exposure factors and selects proper image receptor.	0	1	2	3	4				
4. Positions patient efficiently and correctly for the examination.	0	1	2	3	4				
5. Uses proper immobilization devices.	0	1	2	3	4				
6. Uses tube angulations properly.	0	1	2	3	4				
7. Knows storage location of necessary supplies.	0	1	2	3	4				
8. Examination completed in a timely fashion.	0	1	2	3	4				
9. Properly archives images to PACS or prints images.	0	1	2	3	4				
10. Uses proper SID.	0	1	2	3	4				
11. Uses correct film sizes.	0	1	2	3	4				
12. Uses proper alignment of x-ray tube to film. (Bucky or grid)	0	1	2	3	4				
13. Uses proper central ray location.	0	1	2	3	4				
14. Uses correct type and orientation of Image Receptor. (Screen, extremity, CR, DR) (Cassette, image intensifier) (Lengthwise, crosswise)	0	1	2	3	4				
15. Uses personal lead markers on all images.	0	1	2	3	4				
Total for Section II: _____									
Maximum points = 60 Minimum passing points: Juniors= 24 and Seniors/Post Grad=27									
III. Film Critique									
1. Diagnostic image quality. (Contrast/density) CR exposure range must meet department protocols.	0	1	2	3	4				
2. Patient positioning demonstrates anatomy and pathology properly.	0	1	2	3	4				
3. Able to identify which projection of the image was taken. (AP, Lateral, RAO, LAO, etc.)	0	1	2	3	4				
Total for Section III: _____									
Maximum points = 12 Minimum passing points: Juniors=5 and Seniors/Post Grads=6									
IV. Radiation Protection									
1. Patient assessment. (Child bearing age, adolescent, etc.)	0	1	2	3	4				
2. Uses proper shielding and radiation protection for patient\staff\parents.	0	1	2	3	4				
3. Uses proper collimation of the body part.	0	1	2	3	4				
4. Uses appropriate patient body positioning to ensure gonad radiation protection.	0	1	2	3	4				
Total for Section IV: _____									
Maximum points = 16 Minimum passing points: Juniors=7 and Seniors/Post Grads=8									

*** If the student receives a "0" in any of the above categories, then he/she will not receive credit for the comp. ***

RT's Name (Print): _____ RT's Signature: _____ Date: _____

In order for this form to be valid, the technologist must be registered by the ARRT for at least 2 years.

Finger(s)	Forearm	Toe(s)	Knee	Shoulder	C-spine	Sacrum	Sternum	Orbits	Skull (Caldwell)
Hand	Elbow	Foot	Femur	Clavicle	T-Spine	Coccyx	Ribs	Pelvis	Skull (Townes)
Bone Age	Humerus	Ankle	Hip	Scapula	L-Spine	SI Joints	Chest (<6 yrs old)	Abdomen	Skull (Lateral)
Wrist	Forearm	Tibia/Fibula	Knee	SC Joints		Scanogram	Chest (>6 yrs old)	Scoliosis	Skull (SMV)
	Elbow			AC Joints				Orbits	Skull (Water's)

