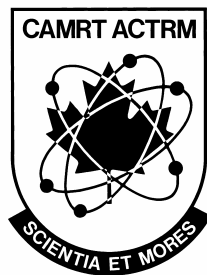


# Radiological Technology

## COMPETENCY PROFILE

**November 2006**

Revised February 2008



### **Revised Profile** for use with the development of the **September 2011 Certification exams**

Prepared by the Radiological Technology Competency Profile Task Group

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# COMPETENCY PROFILE - RADIOLOGICAL TECHNOLOGY

## Competencies for Entry Level Radiological Technologists

This document describes the essential competencies required for an entry-level radiological technologist in Canada to provide best practice as defined by safe, competent and ethical practice of radiological technology in a variety of clinical environments. The profile defines competencies reflecting the integration of knowledge, skills, attitudes and judgment necessary to practice in an environment that requires the technologist to use effective organizational skills and critical thinking. This requires the ability to assess, adapt, modify, analyse and evaluate in a variety of situations and environments in the practice of radiological technology. Critical decision-making is, therefore, inherent to the practice of radiological technology and is demonstrated in the competencies required of entry-to-practice technologists.

The competency profile defines the standard for certification and registration of entry-level radiological technologists in Canada.

The document is also used to:

- provide direction to entry-level education programs to assist in developing curriculum
- inform Ministries of Health and Education of the standard expected from entry-level radiological technologists
- inform the public and employers of the standard expected from entry-level radiological technologists
- assist CMA Conjoint Committee with accreditation of education programs
- provides a guide to identify professional development needs for practicing technologists
- develop a blueprint for CAMRT certification examination

Accredited programs must ensure that their certification candidates possess all the competencies listed in the profile. Education programs are encouraged to include additional skills at their discretion.

In the development of the competencies, the following assumptions have been made.

That the Radiological Technologist:

- has completed an accredited Canadian program, or other recognized program;
- has acquired the theoretical knowledge required to achieve a wide range of competencies;
- has developed a broad knowledge base that has been assessed prior to the certification examination;
- commits to the principle that their primary role and function is to serve the public interest;
- is a member of the inter-professional health care team, collaborating with other health care professionals to provide appropriate patient care in the delivery of diagnostic imaging services;
- is responsible for the safe and effective application of ionizing radiation;
- is responsible for the production, assessment, optimization and archiving of images;
- is responsible for the performance of diagnostic radiographic/fluoroscopic procedures;
- participates in interventional procedures;
- is responsible for the education of patients, public and other health care providers regarding ionizing radiation for medical use;

- performs effectively in all environments taking into consideration physical, psychological, social, economic and cultural factors that can occur in predictable and unpredictable ways ;
- recognizes patients as unique individuals, treating them with dignity and respect;
- practices in accordance with legislation, regulatory and professional bodies' standards of practice, scope of practice, codes of ethics and other relative documents;
- performs in a manner consistent with public interest, employment philosophies and practices, current research and advancing technology;
- seeks guidance from experienced practitioners, colleagues and employers to enhance the technologist's individual experience and knowledge;
- promotes and participates in the advancement of this dynamic profession through active involvement, continuous learning, professional development and research;
- adheres to and promotes professional standards.

The Radiological Technology Competency Profile is divided into 13 modules:

<b>Module A</b>	<b>Professional Practice</b>
<b>Module B</b>	<b>Patient Management</b>
<b>Module C</b>	<b>Radiation Health and Safety</b>
<b>Module D</b>	<b>Quality Management</b>
<b>Module E</b>	<b>Operate Imaging Equipment</b>
<b>Module F</b>	<b>Skeletal System</b>
<b>Module G</b>	<b>Digestive System</b>
<b>Module H</b>	<b>Respiratory System</b>
<b>Module I</b>	<b>Urinary System</b>
<b>Module J</b>	<b>Reproductive System</b>
<b>Module K</b>	<b>Computed Tomography</b>
<b>Module L</b>	<b>Bone Mineral Densitometry</b>
<b>Module M</b>	<b>Vascular / Interventional Studies</b>

## EXAMINABLE COMPETENCIES & COMPETENCY LEVELS

**All competencies listed in the competency profile must be achieved by graduates of an accredited medical radiation technology program.** This will be assessed for compliance during the accreditation survey conducted by the CMA Conjoint Accreditation Services. It is realized that due to regional and institutional differences level of achievement for some competencies may vary based on evolving changes in technology, practice and facility policies.

**Not all competencies will be tested on the CAMRT certification exam.**

**The EXAMINABLE COMPETENCIES are those competencies that have a competency level indicated in the column to the right of the written competency.**

The EXAMINABLE COMPETENCIES were established by the discipline specific workgroups working both within their disciplines and together as a core group using the feedback received from stakeholders during the competency profile revision process.

There are **three** competency levels (CL)

- **HIGH (H)**
- **MEDIUM (M)**
- **LOW (L)**

Competency levels were determined through a survey done by technologists/therapists and managers of Diagnostic Imaging and Radiation Therapy Departments. The survey requested a rating of the examinable competencies for frequency of application, importance and future significance in the healthcare work environment. The results of the survey were analyzed and the **examinable competencies** rated either **H, M, L** based on the response to frequency, importance and significance for the future.

**The competency levels provide a guide (blue print) for certification exam development.** More weighting will be placed on the development and use of questions associated with a HIGH level competency as opposed to a MEDIUM or LOW rated level competency where emphasis on question development and use on the certification exam will reflect the competency level.

Validation of all competencies, including identification of examinable competencies and their associated competency levels will be conducted at least every five years. Due to rapid changes in technology and practice certain portions of the profile may be validated more frequently to ensure the profiles are reflective of practice and workplace needs.

## MODULE A PROFESSIONAL PRACTICE

*Whenever both national and provincial regulations/code of ethics are in place, only the national standards will be tested on the CAMRT certification examination.*

		CL	
<b>A 1</b>	<b>Demonstrate critical thinking</b>		
A1.1	Apply critical thinking and problem solving strategies to ensure best practices		
<b>A 2</b>	<b>Practice in accordance with legislation, regulations and ethical guidelines related to the profession</b>		
A2.1	Practice patient care in a manner that protects the patient's legal rights	H	
A2.2	Demonstrate an understanding of the current and emerging issues in the Canadian Healthcare System		
A2.3	Perform all duties in compliance with sexual abuse prevention guidelines		
A2.4	Practice in accordance with national association's/provincial regulatory body's code of ethics		
A2.5	Practice within scope of practice in accordance with national association and provincial regulatory body's legislation requirements		
A2.6	Practice in accordance with the national association's and provincial regulatory body's standards of practice		
A2.7	Practice in accordance with legislation, regulations/by-laws regulating medical radiation technologists		
A2.8	Provide a diagnostic/therapeutic impression to healthcare professionals to assist in patient care management	H	
<b>A 3</b>	<b>Demonstrate professional behaviors</b>		
A3.1	Demonstrate respect and sensitivity in both patient and professional interactions		
A3.2	Utilize stress management techniques		
A3.3	Utilize conflict management techniques		
A3.4	Manage change within the evolving healthcare system		
A3.5	Exchange knowledge/skills with other members of health care teams to promote collaborative practice		
A3.6	Provide clinical instruction guidance and evaluation for students		
A3.7	Assume a lead role during diagnostic/ therapeutic procedures when working with the healthcare team		
A3.8	Present a professional appearance and manner		
<b>A 4</b>	<b>Participate in professional development</b>		
A4.1	Engage in reflective practice, self-assessment to identify a learning plan that will promote best practices		

		CL	
A4.2	Demonstrate a basic understanding of current and emerging imaging, planning and therapeutic technologies used by interdisciplinary practices	H	
<b>A 5 Participate in research for the purpose of evidence based decision-making</b>			
A5.1	Demonstrate an understanding of: how to review current literature, research methodology, data collection and analysis of statistics in order to promote evidence based practice		
A5.2	Participate in research-based project		
A5.3	Discuss the ethical issues involved with research		
<b>A 6 Understand the application of resource management principles</b>			
A6.1	Differentiate between capital and operating budgets		
A6.2	Recognize implications of practice on budgets		
<b>A 7 Participate in resource management</b>			
A7.1	Prioritize workflow to optimize patient outcomes	H	
A7.2	Monitor inventory of material and supplies		

## MODULE B PATIENT MANAGEMENT

		CL	
<b>B 1</b>	<b>Provide a safe environment to minimize the risk of adverse events to patient and staff</b>		
B1.1	Provide a safe, clean and comfortable environment	H	
B1.2	Transport patient safely using equipment based on patient's physical and cognitive status and resources available	H	
B1.3	Transfer patient safely using equipment and techniques based on patient's physical and cognitive status	H	
B1.4	Employ proper body mechanics to prevent harm to self and the patient	H	
B1.5	Implement immobilization techniques based on age, physical and cognitive status of patient and type of procedure	H	
B1.6	Adjust patient position to prevent harm and promote comfort and optimize procedure outcomes	H	
B1.7	Verify patient identity following a standardized protocol		
B1.8	Assess documentation for compliance with legal requirements		
B1.9	Complete documentation for compliance with legal requirements		
<b>B 2</b>	<b>Interact within the healthcare environment</b>		
B2.1	Establish patient rapport		
B2.2	Use various forms of communication to provide/obtain relevant, accurate and complete information		
B2.3	Exchange information regarding details of procedure with patients and their support persons to enable them to make informed decisions		
B2.4	Assess and respond to cultural, ethnic, linguistic, religious, and socio-economic variables affecting communication		
<b>B 3</b>	<b>Perform patient assessments and medical interventions within scope of practice in accordance with provincial regulatory body's legislation requirements</b>		
B3.1	Perform patient assessment	H	
B3.2	Assess, monitor and respond to various levels of patient status	H	
B3.3	Perform / participate in medical interventions	M	
B3.4	Assess, monitor and respond to the patient's therapeutic and supportive devices to ensure patient safety and comfort	M	
B3.5	Ensure the patient's needs are met prior to release from the technologist's care		
<b>B 4</b>	<b>Implement infection control practices</b>		
B4.1	Understand transmission mode of nosocomial infections (host, agent and environment)	H	
B4.2	Utilize established practices for preventing the transmission of infection in health care	H	
B4.3	Apply principles of asepsis	H	

		CL	
B4.4	Follow established protocols when handling and disposing of contaminated and biohazardous materials such as sharps and body fluids	H	
B4.5	Adhere to protective environmental protocols for patients with compromised immunity	M	
B4.6	Adhere to protocols when caring for patients with antibiotic resistant organisms	H	
B4.7	Adhere to transmission based precautions for airborne, droplet and contact modes of transmission	H	
<b>B 5 Respond to patient hygiene needs</b>			
B5.1	Assist the patient with personal care		

## MODULE C RADIATION HEALTH AND SAFETY

		CL	
<b>C1</b>	<b>Apply radiation safety practices to patients, technologists, staff, care givers and general public</b>		
C1.1	Utilize protective devices/apparel according to organ sensitivities	H	
C1.2	Utilize appropriate accessory devices to minimize dose	H	
C1.3	Determine patient's pregnancy status and take appropriate action	H	
C1.4	Apply the ALARA principle in the practice of medical radiation technology	H	
C1.5	Utilize protective practices specific to fluoroscopy	H	
C1.6	Utilize protective practices specific to mobile/general radiography	H	
C1.7	Utilize protective practices specific to Computed Tomography	M	
C1.8	Utilize protective practices specific to mammography	L	
<b>C 2</b>	<b>Monitor radiation exposure dose to patients, technologists, staff, care givers and general public</b>		
C2.1	Operate and monitor equipment in compliance with national and provincial radiation safety legislation	H	
C2.2	Wear and maintain radiation monitoring device	H	
C2.3	Adhere to radiation dose limit standards	H	
C2.4	Interpret and respond to radiation exposure dose reports	H	
C2.5	Recognize the significance of radiation safety surveys		
<b>C 3</b>	<b>Advocate radiation safety</b>		
C3.1	Educate individuals regarding radiation risks	H	
C3.2	Determine and discuss relative dose expectations of radiographic examinations	M	
C3.3	Consult with medical radiation personnel as required		

## MODULE D QUALITY MANAGEMENT

		CL	
<b>D 1</b>	<b>Participate in Quality Assurance Program</b>		
D1.1	Participate in activities that support a Quality Assurance Program		
D1.2	Utilize principles of risk management		
D1.3	Adhere to Workplace Hazardous Materials Information System (WHMIS) regulations and Occupational Health and Safety (OH&S) regulations		
<b>D 2</b>	<b>Participate in Quality Control Program</b>		
D2.1	Evaluate routine procedures to assess the performance of radiographic imaging modalities and initiate corrective action as necessary	H	
D2.2	Evaluate routine procedures to assess the performance of fluoroscopic imaging modalities and initiate corrective action as necessary	M	
D2.3	Evaluate routine procedures to assess the performance of the CT unit and initiate corrective action as necessary	M	
D2.4	Evaluate routine procedures to assess the performance of the BMD unit and initiate corrective action as necessary	L	
D2.5	Evaluate routine procedures to assess the performance of the mammographic unit and initiate corrective action as necessary	L	
D2.6	Evaluate routine procedures to assess the performance of digital image receptors and initiate corrective action as necessary	H	
D2.7	Evaluate routine procedures to assess the performance of accessory equipment and initiate corrective action as necessary	H	
D2.8	Evaluate the integrity of protective apparel and devices and initiate corrective action as necessary	H	
D2.9	Evaluate routine procedures to assess the performance of film processing equipment and initiate corrective action as necessary	M	

## MODULE E OPERATE IMAGING EQUIPMENT

		CL	
<b>E 1</b>	<b>Operate imaging modality for digital/analog image acquisition consistent with the procedure and the patient's condition</b>		
E1.1	Determine and select parameters for performing procedures on a radiographic unit	H	
E1.2	Determine and select parameters for performing procedures on a fluoroscopic equipment	M	
E1.3	Determine and select parameters for performing procedures with a radiographic mobile unit	M	
E1.4	Determine and select parameters for performing procedures with a fluoroscopic mobile unit	M	
E1.5	Determine and select parameters for performing procedures on a Computed Tomography (CT) unit	M	
E1.6	Determine and select parameters for performing procedures on a Bone Mineral Density (BMD) unit	L	
E1.7	Determine and select parameters required when participating in the performance of procedures on a mammographic unit	L	
E1.8	Determine and select parameters required when participating in the performance of procedures in an interventional suite	L	
E1.9	Utilize a Computed Radiography (CR) image receptor	H	
E1.10	Utilize a Direct Radiography (DR) image receptor	M	
E1.11	Utilize a film /screen image receptor if available	L	
E1.12	Adapt exposure factors based on evaluation of the patient and existing variables	H	
E1.13	Activate, monitor, and manage exposure	H	
E1.14	Verify accuracy of patient demographics on the acquired image	H	
<b>E 2</b>	<b>Analyze image for quality and diagnostic purposes and adjust parameters for additional images</b>		
E2.1	Evaluate the diagnostic quality of the image and take appropriate action	H	
E2.2	Verify visibility and accuracy of radiographic markers and/or annotation	H	
E2.3	Evaluate image for artifacts and take appropriate action	H	
E2.4	Perform post-processing to optimize the digital image	H	
<b>E 3</b>	<b>Utilize digital networking and archival systems</b>		
E3.1	Utilize Picture Archiving Communication System (PACS) for purposes of image display, networking, archival and retrieval	H	
E3.2	Demonstrate an understanding of networking systems	H	
E3.3	Demonstrate an understanding of standards and protocols	M	
E3.4	Demonstrate an understanding of the methods used for storage of data	M	

## MODULE F IMAGING PROCEDURES of the SKELETAL SYSTEM

		CL	
<b>F1</b>	<b>Perform Skeletal System Imaging Procedures</b>		
F1.1	Understand the pathology and anomalies related to the skeletal system, with respect to patient signs and symptoms, clinical presentation and diagnostic image presentation	H	
F1.2	Interview patient to verify and complement clinical history	H	
F1.3	Prioritize examination according to patient's medical status and resources available	H	
F1.4	Assess and monitor patient's condition	H	
<b>F 2</b>	<b>Perform Imaging Procedure of Finger</b>	<b>H</b>	
F2.1	Understand the gross anatomy, relational anatomy and physiology of the finger	H	
F2.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	H	
F2.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	H	
F2.4	Plan the radiographic imaging procedure	H	
F2.5	Position the finger using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies <ul style="list-style-type: none"> <li>- Posteroanterior (PA)</li> <li>- Anteroposterior (AP)</li> <li>- Anterior Oblique</li> <li>- Lateral</li> </ul>	H	
F2.6	Adapt positioning requirements according to patient's condition	H	
F2.7	Evaluate quality of images for the purpose of diagnostic interpretation	H	
F2.8	Obtain additional images as required	H	
<b>F 3</b>	<b>Perform Imaging Procedure of Thumb</b>	<b>H</b>	
F3.1	Understand the gross anatomy, relational anatomy and physiology of the thumb	H	
F3.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	H	
F3.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	H	
F3.4	Plan the radiographic imaging procedure	H	

		CL	
F3.5	Position the thumb using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Posteroanterior (PA) - Anteroposterior (AP) - Anterior Oblique - Lateral	H	
F3.6	Adapt positioning requirements according to patient's condition	H	
F3.7	Evaluate quality of images for the purpose of diagnostic interpretation	H	
F3.8	Obtain additional images as required	H	
<b>F 4</b>	<b>Perform Imaging Procedure of Hand</b>	<b>H</b>	
F4.1	Understand the gross anatomy, relational anatomy and physiology of the hand	H	
F4.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	H	
F4.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	H	
F4.4	Plan the radiographic imaging procedure	H	
F4.5	Position the hand using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Posteroanterior (PA) - Anteroposterior (AP) - Anterior Oblique - Posterior Obliques – Bilateral - Lateral (fan/extension)	H	
F4.6	Adapt positioning requirements according to patient's condition	H	
F4.7	Evaluate quality of images for the purpose of diagnostic interpretation	H	
F4.8	Obtain additional images as required	H	
<b>F 5</b>	<b>Perform Imaging Procedure of Wrist</b>	<b>H</b>	
F5.1	Understand the gross, relational anatomy and physiology of the wrist.	H	
F5.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	H	
F5.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	H	
F5.4	Plan the radiographic imaging procedure	H	

		CL	
F5.5	Position the wrist using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Posteroanterior (PA) - Anteroposterior (AP) - Anterior Oblique - Posterior Oblique - Lateral	H	
F5.6	Adapt positioning requirements according to patient's condition	H	
F5.7	Evaluate quality of images for the purpose of diagnostic interpretation	H	
F5.8	Obtain additional images as required	H	
<b>F 6</b>	<b>Perform Imaging Procedure of Scaphoid</b>	<b>H</b>	
F6.1	Understand the gross anatomy, relational anatomy and physiology of the scaphoid	H	
F6.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	H	
F6.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	H	
F6.4	Plan the radiographic imaging procedure	H	
F6.5	Position the scaphoid using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Posteroanterior (PA) with ulnar deviation - Posteroanterior (PA) axial	H	
F6.6	Adapt positioning requirements according to patient's condition	H	
F6.7	Evaluate quality of images for the purposes of diagnostic interpretation	H	
F6.8	Obtain additional images as required	H	
<b>F 7</b>	<b>Perform Imaging Procedure of Forearm</b>	<b>H</b>	
F7.1	Understand the gross anatomy, relational anatomy and physiology of the forearm	H	
F7.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	H	
F7.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	H	
F7.4	Plan the radiographic imaging procedure	H	
F7.5	Position the forearm using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Anteroposterior (AP) - Lateral	H	
F7.6	Adapt positioning requirements according to patient's condition	H	

		CL	
F7.7	Evaluate quality of images for the purposes of diagnostic interpretation	H	
F7.8	Obtain additional images as required	H	
<b>F 8</b>	<b>Perform Imaging Procedure of Elbow</b>	<b>H</b>	
F8.1	Understand the gross anatomy, relational anatomy and physiology of the elbow	H	
F8.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	H	
F8.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	H	
F8.4	Plan the radiographic imaging procedure	H	
F8.5	Position the elbow using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies <ul style="list-style-type: none"> <li>- Anteroposterior (AP) (elbow in extension, partial flexion)</li> <li>- Anteroposterior /posteroanterior (AP/PA) (elbow in acute flexion)</li> <li>- Posterior oblique medial rotation</li> <li>- Posterior oblique lateral rotation</li> <li>- Lateral</li> <li>- Lateral - Radial head (4 position series)</li> <li>- Lateral - Radial head and capitulum view</li> </ul>	H	
F8.6	Adapt positioning requirements according to patient's condition	H	
F8.7	Evaluate quality of images for the purpose of diagnostic interpretation	H	
F8.8	Obtain additional images as required	H	
<b>F 9</b>	<b>Perform Imaging Procedure of Humerus</b>	<b>H</b>	
F9.1	Understand the gross anatomy, relational anatomy and physiology of the humerus	H	
F9.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	H	
F9.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	H	
F9.4	Plan the radiographic imaging procedure	H	
F9.5	Position the humerus using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies <ul style="list-style-type: none"> <li>- Anteroposterior (AP)</li> <li>- Lateral</li> </ul>	H	
F9.6	Adapt positioning requirements according to patient's condition	H	
F9.7	Evaluate quality of images for the purpose of diagnostic interpretation	H	
F9.8	Obtain additional images as required	H	

		CL	
<b>F 10</b>	<b>Perform Imaging Procedure of Shoulder</b>	<b>H</b>	
F10.1	Understand the gross anatomy, relational anatomy and physiology of the shoulder	H	
F10.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	H	
F10.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	H	
F10.4	Plan the radiographic imaging procedure	H	
F10.5	Position the shoulder using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies <ul style="list-style-type: none"> <li>- Anteroposterior (AP)</li> <li>- arm in neutral position</li> <li>- arm in internal rotation</li> <li>- arm in external rotation</li> <li>- Glenoid cavity posterior oblique</li> <li>- Scapular Y anterior oblique</li> <li>- Inferosuperior axial</li> <li>- Superoinferior axial</li> </ul>	H	
F10.6	Adapt positioning requirements according to patient's condition	H	
F10.7	Evaluate quality of images for the purpose of diagnostic interpretation	H	
F10.8	Obtain additional images as required	H	
<b>F 11</b>	<b>Perform Imaging Procedure of Clavicle</b>	<b>H</b>	
F11.1	Understand the gross anatomy, relational anatomy and physiology of the clavicle	H	
F11.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	H	
F11.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	H	
F11.4	Plan the radiographic imaging procedure	H	
F11.5	Position the clavicle using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies <ul style="list-style-type: none"> <li>- Anteroposterior (AP)</li> <li>- Posteroanterior (PA)</li> <li>- Anteroposterior (AP) axial</li> <li>- Posteroanterior (PA) axial</li> </ul>	H	
F11.6	Adapt positioning requirements according to patient's condition	H	
F11.7	Evaluate quality of images for the purpose of diagnostic	H	
F11.8	Obtain additional images as required	H	

		CL	
<b>F 12</b>	<b>Perform Imaging Procedure of Acromioclavicular Joints</b>	<b>M</b>	
F12.1	Understand the gross anatomy, relational anatomy and physiology of the acromioclavicular joints	M	
F12.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	M	
F12.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	M	
F12.4	Plan the radiographic imaging procedure	M	
F12.5	Position the acromioclavicular joints using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Anteroposterior (AP) with and without weights	M	
F12.6	Adapt positioning requirements according to patient's condition	M	
F12.7	Evaluate quality of images for the purpose of diagnostic interpretation	M	
F12.8	Obtain additional images as required	M	
<b>F 13</b>	<b>Perform Imaging Procedure of Scapula</b>	<b>L</b>	
F13.1	Understand the gross anatomy, relational anatomy and physiology of the scapula	L	
F13.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	L	
F13.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	L	
F13.4	Plan the radiographic imaging procedure	L	
F13.5	Position the scapula using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Anteroposterior (AP) - Lateral	L	
F13.6	Adapt positioning requirements according to patient's condition	L	
F13.7	Evaluate quality of images for the purpose of diagnostic interpretation	L	
F13.8	Obtain additional images as required	L	
<b>F 14</b>	<b>Perform Imaging Procedure of Toes</b>	<b>H</b>	
F14.1	Understand the gross anatomy, relational anatomy and physiology of the toes	H	
F14.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	H	
F14.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	H	
F14.4	Plan the radiographic imaging procedure	H	

		CL	
F14.5	Position the toes using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Anteroposterior (AP) - Anteroposterior (AP) axial - Posterior Oblique - Lateral	H	
F14.6	Adapt positioning requirements according to patient's conditions	H	
F14.7	Evaluate quality of images for the purpose of diagnostic interpretation	H	
F14.8	Obtain additional images as required	H	
<b>F 15</b>	<b>Perform Imaging Procedure of Foot</b>	<b>H</b>	
F15.1	Understand the gross anatomy, relational anatomy and physiology of the foot.	H	
F15.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	H	
F15.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	H	
F15.4	Plan the radiographic imaging procedure	H	
F15.5	Position the foot using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Anteroposterior (AP) - Anteroposterior axial (AP) - Posterior Oblique, medial rotation - Lateral - Anteroposterior (AP) Axial weight bearing - Lateral weight bearing	H	
F15.6	Adapt positioning requirements according to patient's condition	H	
F15.7	Evaluate quality of images for the purpose of diagnostic interpretation	H	
F15.8	Obtain additional images as required	H	
<b>F 16</b>	<b>Perform Imaging Procedure of Ankle</b>	<b>H</b>	
F16.1	Understand the gross anatomy, relational anatomy and physiology of the ankle	H	
F16.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	H	
F16.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	H	
F16.4	Plan the radiographic imaging procedure	H	

		CL	
F16.5	Position the ankle using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Anteroposterior (AP) - Posterior Oblique with medial rotation (15 °-20° mortise) - Posterior Oblique with medial rotation (45°) - Lateral	H	
F16.6	Adapt positioning requirements according to patient's condition	H	
F16.7	Evaluate quality of images for the purpose of diagnostic interpretation	H	
F16.8	Obtain additional images as required	H	
<b>F 17</b>	<b>Perform Imaging Procedure of Calcaneus</b>	<b>M</b>	
F17.1	Understand the gross anatomy, relational anatomy and physiology of the calcaneus	M	
F17.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	M	
F17.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	M	
F17.4	Plan the radiographic imaging procedure	M	
F17.5	Position the calcaneus using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Lateral - Plantodorsal (axial)	M	
F17.6	Adapt positioning requirements according to patient's condition	M	
F17.7	Evaluate quality of images for the purpose of diagnostic interpretation	M	
F17.8	Obtain additional images as required	M	
<b>F 18</b>	<b>Perform Imaging Procedure of Tibia and Fibula</b>	<b>H</b>	
F18.1	Understand the gross anatomy, relational anatomy and physiology of the tibia and fibula	H	
F18.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	H	
F18.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	H	
F18.4	Plan the radiographic imaging procedure	H	
F18.5	Position the tibia and fibula using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Anteroposterior (AP) - Lateral	H	
F18.6	Adapt positioning requirements according to patient's condition	H	
F18.7	Evaluate quality of images for the purpose of diagnostic interpretation	H	

		<b>CL</b>	
F18.8	Obtain additional images as required	H	
<b>F 19</b>	<b>Perform Imaging Procedure of Knee</b>	<b>H</b>	
F19.1	Understand the gross anatomy, relational anatomy and physiology of the knee	H	
F19.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	H	
F19.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	H	
F19.4	Plan the radiographic imaging procedure	H	
F19.5	Position the knee using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies <ul style="list-style-type: none"> <li>- Anteroposterior (AP)</li> <li>- Posterior Oblique with medial rotation</li> <li>- Posterior Oblique with lateral rotation</li> <li>- Anterior Oblique with medial rotation</li> <li>- Anterior Oblique with lateral rotation</li> <li>- Lateral</li> <li>- Anteroposterior (AP) weight bearing</li> <li>- Posteroanterior (PA) Axial for intercondyloid fossa</li> </ul>	H	
F19.6	Adapt positioning requirements according to patient's condition	H	
F19.7	Evaluate quality of images for the purpose of diagnostic interpretation	H	
F19.8	Obtain additional images as required	H	
<b>F 20</b>	<b>Perform Imaging Procedure of Patella</b>	<b>M</b>	
F20.1	Understand the gross anatomy, relational anatomy and physiology of the patella.	M	
F20.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	M	
F20.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	M	
F20.4	Plan the radiographic imaging procedure	M	
F20.5	Position the patella using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies <ul style="list-style-type: none"> <li>- Anteroposterior (AP)</li> <li>- Posteroanterior (PA)</li> <li>- Lateral</li> <li>- Tangential</li> </ul>	M	
F20.6	Adapt positioning requirements according to patient's condition	M	
F20.7	Evaluate quality of images for the purpose of diagnostic interpretation	M	
F20.8	Obtain additional images as required	M	

		CL	
<b>F 21</b>	<b>Perform Imaging Procedure of Femur</b>	<b>H</b>	
F21.1	Understand the gross anatomy, relational anatomy and physiology of the femur	H	
F21.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	H	
F21.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	H	
F21.4	Plan the radiographic imaging procedure	H	
F21.5	Position the femur using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Anteroposterior (AP) - Lateral	H	
F21.6	Adapt positioning requirements according to patient's condition	H	
F21.7	Evaluate quality of images for the purpose of diagnostic interpretation	H	
F21.8	Obtain additional images as required	H	
<b>F 22</b>	<b>Perform Imaging Procedure of Hip(s)</b>	<b>H</b>	
F22.1	Understand the gross anatomy, relational anatomy and physiology of the hip(s)	H	
F22.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	H	
F22.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	H	
F22.4	Plan the radiographic imaging procedure	H	
F22.5	Position the hip(s) using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Anteroposterior (AP) Unilateral - Anteroposterior (AP) Bilateral - Bilateral Posterior Oblique (Frog leg) - Lateral - Axiolateral	H	
F22.6	Adapt positioning requirements according to patient's condition	H	
F22.7	Evaluate quality of images for the purpose of diagnostic interpretation	H	
F22.8	Obtain additional images as required	H	
<b>F 23</b>	<b>Perform Imaging Procedure of Pelvis</b>	<b>H</b>	
F23.1	Understand the gross anatomy, relational anatomy and physiology of the pelvis	H	
F23.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	H	

		CL	
F23.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	H	
F23.4	Plan the radiographic imaging procedure	H	
F23.5	Position the pelvis using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies <ul style="list-style-type: none"> <li>- Anteroposterior (AP)</li> <li>- Anteroposterior (AP) Axial (Outlet)</li> <li>- Acetabulum – posterior oblique (Judet)</li> <li>- Ilium – Anterior Oblique</li> <li>- Ilium – Posterior Oblique</li> </ul>	H	
F23.6	Adapt positioning requirements according to patient's condition	H	
F23.7	Evaluate quality of images for the purpose of diagnostic interpretation	H	
F23.8	Obtain additional images as required	H	
<b>F 24</b>	<b>Perform Pediatric Bone Age Studies</b>	<b>L</b>	
F24.1	Understand skeletal development	L	
F24.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous	L	
F24.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	L	
F24.4	Plan the radiographic imaging procedure	L	
F24.5	Position the patient using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies <ul style="list-style-type: none"> <li>- Posteroanterior (PA) hands and wrist</li> <li>- Anteroposterior (AP) left knee</li> </ul>	L	
F24.6	Adapt positioning requirements according to patient's condition	L	
F24.7	Evaluate quality of images for the purpose of diagnostic interpretation	L	
F24.8	Obtain additional images as required	L	
<b>F 25</b>	<b>Perform Imaging Procedure of Cervical Vertebrae</b>	<b>H</b>	
F25.1	Understand the gross anatomy, relational anatomy and physiology of the cervical vertebrae	H	
F25.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	H	
F25.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	H	
F25.4	Plan the radiographic imaging procedure	H	

		CL	
F25.5	Position the cervical vertebrae using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Anteroposterior (AP) atlas and axis open mouth - Anteroposterior (AP) axial lower cervical - Lateral - Anterior Obliques - Posterior Obliques - Lateral with hyperflexion - Lateral with hyperextension	H	
F25.6	Adapt positioning requirements according to patient's condition	H	
F25.7	Evaluate quality of images for the purpose of diagnostic interpretation	H	
F25.8	Obtain additional images as required	H	
<b>F 26</b>	<b>Perform Imaging Procedure of Thoracic Vertebrae</b>	<b>H</b>	
F26.1	Understand the gross, relational anatomy and physiology of the thoracic vertebrae	H	
F26.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	H	
F26.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	H	
F26.4	Plan the radiographic imaging procedure	H	
F26.5	Position the thoracic vertebrae using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Anteroposterior (AP) - Lateral (Twining) - Lateral	H	
F26.6	Adapt positioning requirements according to patient's condition	H	
F26.7	Evaluate quality of images for the purpose of diagnostic interpretation	H	
F26.8	Obtain additional images as required	H	
<b>F 27</b>	<b>Perform Imaging Procedure of Lumbar Vertebrae</b>	<b>H</b>	
F27.1	Understand the gross, relational anatomy and physiology of the lumbar vertebrae	H	
F27.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	H	
F27.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	H	
F27.4	Plan the radiographic imaging procedure	H	

		CL	
F27.5	Position the lumbar vertebrae using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Anteroposterior (AP) - Lateral - Anterior obliques - Posterior obliques - Lateral with hyperflexion - Lateral with hyperextension - Lateral L5/S1 lumbosacral junction	H	
F27.6	Adapt positioning requirements according to patient's condition	H	
F27.7	Evaluate quality of images for the purpose of diagnostic interpretation	H	
F27.8	Obtain additional images as required	H	
<b>F 28</b>	<b>Perform Imaging Procedure of Sacroiliac Joints</b>	<b>M</b>	
F28.1	Understand the gross, relational anatomy and physiology of the sacroiliac joints	M	
F28.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	M	
F28.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	M	
F28.4	Plan the radiographic imaging procedure	M	
F28.5	Position the sacroiliac joints using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required - Anatomical structures/pathologies - Anteroposterior (AP) axial - Posteroanterior (PA) axial - Posterior obliques	M	
F28.6	Adapt positioning requirements according to patient's condition	M	
F28.7	Evaluate quality of images for the purpose of diagnostic interpretation	M	
F28.8	Obtain additional images as required	M	
<b>F 29</b>	<b>Perform Imaging Procedure of Sacrum</b>	<b>M</b>	
F29.1	Understand the gross, relational anatomy and physiology of the sacrum	M	
F29.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	M	
F29.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	M	
F29.4	Plan the radiographic imaging procedure	M	
F29.5	Counsel patients with respect to pre-procedural care	M	

		CL	
F29.6	Position the sacrum using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Anteroposterior (AP) axial - Lateral	M	
F29.7	Adapt positioning requirements according to patient's condition	M	
F29.8	Evaluate quality of images for the purpose of diagnostic interpretation	M	
F29.9	Obtain additional images as required	M	
<b>F 30</b>	<b>Perform Imaging Procedure of Coccyx</b>	<b>L</b>	
F30.1	Understand the gross, relational anatomy and physiology of the coccyx	L	
F30.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	L	
F30.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	L	
F30.4	Plan the radiographic imaging procedure	L	
F30.5	Counsel patients with respect to pre-procedural care	L	
F30.6	Position the coccyx using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Anteroposterior (AP) axial - Lateral	L	
F30.7	Adapt positioning requirements according to patient's condition	L	
F30.8	Evaluate quality of images for the purpose of diagnostic interpretation	L	
F30.9	Obtain additional images as required	L	
<b>F 31</b>	<b>Perform Imaging Procedure for Scoliosis Series</b>	<b>L</b>	
F31.1	Understand the gross, relational anatomy and physiology of the spine as related to a scoliosis series	L	
F31.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	L	
F31.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	L	
F31.4	Plan the radiographic imaging procedure	L	
F31.5	Position the patient for the scoliosis series using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Posteroanterior (PA) - Anteroposterior (AP) - Lateral - Anteroposterior (AP) with right bending - Anteroposterior (AP) with left bending	L	

		CL	
F31.6	Adapt positioning requirements according to patient's condition	L	
F31.7	Evaluate quality of images for the purpose of diagnostic interpretation	L	
F31.8	Obtain additional images as required	L	
<b>F 32</b>	<b>Perform Imaging Procedure of Sternum</b>		
F32.1	Understand the gross, relational anatomy and physiology of the sternum		
F32.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies		
F32.3	Utilize the clinical information provided to adapt the requested examination to an individual patient		
F32.4	Plan the radiographic imaging procedure		
F32.5	Position the sternum using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Anterior oblique - Lateral		
F32.6	Adapt positioning requirements according to patient's condition		
F32.7	Evaluate quality of images for the purpose of diagnostic interpretation		
F32.8	Obtain additional images as required		
<b>F 33</b>	<b>Perform Imaging Procedure of Ribs</b>	H	
F33.1	Understand the gross, relational anatomy and physiology of the ribs	H	
F33.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	H	
F33.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	H	
F33.4	Plan the radiographic imaging procedure	H	
F33.5	Position the ribs using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Upper Ribs - Anteroposterior (AP) - Posteroanterior (PA) - Anterior obliques - Posterior obliques - Lower Ribs - Anteroposterior (AP) - Posteroanterior (PA) - Anterior obliques - Posterior obliques	H	
F33.6	Adapt positioning requirements according to patient's condition	H	

		<b>CL</b>	
F33.7	Evaluate quality of images for the purpose of diagnostic interpretation	H	
F33.8	Obtain additional images as required	H	
<b>F 34</b>	<b>Perform Imaging Procedure of Skull</b>	<b>M</b>	
F34.1	Understand the gross, relational anatomy and physiology of the skull	M	
F34.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	M	
F34.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	M	
F34.4	Plan the radiographic imaging procedure	M	
F34.5	Position the skull using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Anteroposterior (AP) axial 30° (Towne) - Posteroanterior (PA) axial 15° (Caldwell) - Lateral	M	
F34.6	Adapt positioning requirements according to patient's condition	M	
F34.7	Evaluate quality of images for the purpose of diagnostic interpretation	M	
F34.8	Obtain additional images as required	M	
<b>F 35</b>	<b>Perform Imaging Procedure of Sinuses</b>	<b>H</b>	
F35.1	Understand the gross, relational anatomy and physiology of the sinuses	H	
F35.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	H	
F35.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	H	
F35.4	Plan the radiographic imaging procedure	H	
F35.5	Position the sinuses using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Parietoacanthial (Waters) - Posteroanterior (PA) axial (Caldwell) - Lateral	H	
F35.6	Adapt positioning requirements according to patient's condition	H	
F35.7	Evaluate quality of images for the purpose of diagnostic interpretation	H	
F35.8	Obtain additional images as required	H	
<b>F 36</b>	<b>Perform Imaging Procedure of Facial Bones</b>	<b>H</b>	
F36.1	Understand the gross, relational anatomy and physiology of facial bones	H	
F36.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	H	

		CL	
F36.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	H	
F36.4	Plan the radiographic imaging procedure	H	
F36.5	Position the facial bones using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Posteroanterior (PA) 15° axial (Caldwell) - Parietoacanthial (Waters) - Lateral	H	
F36.6	Adapt positioning requirements according to patient's condition	H	
F36.7	Evaluate quality of images for the purpose of diagnostic interpretation	H	
F36.8	Obtain additional images as required	H	
<b>F 37</b>	<b>Perform Imaging Procedure of Orbits</b>	<b>M</b>	
F37.1	Understand the gross, relational anatomy and physiology of the orbits	M	
F37.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	M	
F37.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	M	
F37.4	Plan the radiographic imaging procedure	M	
F37.5	Position the orbits using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Posteroanterior (PA) 30° axial (Caldwell) - Parietoacanthial (Waters) - Lateral	M	
F37.6	Adapt positioning requirements according to patient's condition	M	
F37.7	Evaluate quality of images for the purpose of diagnostic interpretation	M	
F37.8	Obtain additional images as required	M	
<b>F 38</b>	<b>Perform Imaging Procedure of Nasal Bones</b>	<b>M</b>	
F38.1	Understand the gross, relational anatomy and physiology of the nasal bones	M	
F38.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	M	
F38.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	M	
F38.4	Plan the radiographic imaging procedure	M	
F38.5	Position the nasal bones using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Parietoacanthial (Waters) - Lateral	M	

		<b>CL</b>	
F38.6	Adapt positioning requirements according to patient's condition	M	
F38.7	Evaluate quality of images for the purpose of diagnostic interpretation	M	
F38.8	Obtain additional images as required	M	
<b>F 39</b>	<b>Perform Imaging Procedure of Zygomatic Arches</b>	<b>L</b>	
F39.1	Understand the gross, relational anatomy and physiology of the zygomatic arches	L	
F39.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	L	
F39.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	L	
F39.4	Plan the radiographic imaging procedure	L	
F39.5	Position the zygomatic arch using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Parietoacanthial (Waters) - Tangential - Anteroposterior axial (Towne)	L	
F39.6	Adapt positioning requirements according to patient's condition	L	
F39.7	Evaluate quality of images for the purpose of diagnostic interpretation	L	
F39.8	Obtain additional images as required	L	
<b>F 40</b>	<b>Perform Imaging Procedure of Mandible</b>	<b>M</b>	
F40.1	Understand the gross, relational anatomy and physiology of the mandible	M	
F40.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	M	
F40.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	M	
F40.4	Plan the radiographic imaging procedure	M	
F40.5	Position the mandible using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Anteroposterior (AP) axial (Towne) - Posteroanterior (PA) axial - Anteroposterior (AP) - Posteroanterior (PA) - Axialateral obliques	M	
F40.6	Adapt positioning requirements according to patient's condition	M	
F40.7	Evaluate quality of images for the purpose of diagnostic interpretation	M	
F40.8	Obtain additional images as required	M	

		CL	
<b>F 41</b>	<b>Perform Imaging Procedure of Temporomandibular Joints</b>	<b>L</b>	
F41.1	Understand the gross, relational anatomy and physiology of the temporomandibular joints	L	
F41.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	L	
F41.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	L	
F41.4	Plan the radiographic imaging procedure	L	
F41.5	Position the temporomandibular joints using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies <ul style="list-style-type: none"> <li>- Anteroposterior (PA) axial (Towne)</li> <li>- Axiolateral closed mouth</li> <li>- Axiolateral open mouth</li> <li>- Pantomogram</li> </ul>	L	
F41.6	Adapt positioning requirements according to patient's condition	L	
F41.7	Evaluate quality of images for the purpose of diagnostic interpretation	L	
F41.8	Obtain additional images as required	L	
<b>F 42</b>	<b>Perform Skeletal Radiography for Suspected Child Abuse</b>	<b>L</b>	
F42.1	Understand skeletal development	L	
F42.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	L	
F42.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	L	
F42.4	Plan the radiographic imaging procedure	L	
F42.5	Position the patient using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies <ul style="list-style-type: none"> <li>- Anteroposterior (AP) skull</li> <li>- Lateral skull</li> <li>- Anteroposterior (AP) complete spine</li> <li>- Lateral complete spine</li> <li>- Anteroposterior (AP) both humeri</li> <li>- Anteroposterior (AP) both radii and ulnae</li> <li>- Anteroposterior (AP) both hands and wrists</li> <li>- Anteroposterior (AP) pelvis</li> <li>- Anteroposterior (AP) both femora</li> <li>- Anteroposterior (AP) both tibiae and fibulae</li> <li>- Anteroposterior (AP) both feet</li> <li>- Anteroposterior (AP) chest for ribs</li> <li>- Lateral chest for ribs</li> </ul>	L	

		<b>CL</b>	
F42.6	Adapt positioning requirements according to patient's condition	L	
F42.7	Evaluate quality of images for the purpose of diagnostic interpretation	L	
F42.8	Obtain additional images as required	L	

## MODULE G IMAGING PROCEDURES of the Digestive System

		CL	
<b>G 1</b>	<b>Perform Imaging Procedures of the Digestive System</b>		
G1.1	Understand the pathology and anomalies related to the digestive system, with respect to: patient signs and symptoms, clinical presentation and diagnostic image presentation	H	
G1.2	Interview patient to verify and complement clinical history	H	
G1.3	Prioritize examination according to patient's medical status and resources available	H	
G1.4	Assess and monitor the patient's condition	H	
<b>G 2</b>	<b>Perform Non-Contrast Imaging Procedure of the Abdomen</b>	<b>H</b>	
G2.1	Understand the gross anatomy, relational anatomy and physiology of the abdomen	H	
G2.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	H	
G2.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	H	
G2.4	Plan the radiographic imaging procedure	H	
G2.5	Position the abdomen using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Anteroposterior (AP) (recumbent/erect position) - Left lateral decubitus - Dorsal decubitus	H	
G2.6	Adapt positioning requirements according to patient's condition	H	
G2.7	Evaluate quality of acquired images for the purpose of diagnostic interpretation	H	
G2.8	Obtain additional images as required	H	
<b>G 3</b>	<b>Perform Imaging Procedure of the Esophagus</b>	<b>M</b>	
G3.1	Understand the gross anatomy, relational anatomy and physiology of the esophagus	M	
G3.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	M	
G3.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	M	
G3.4	Plan the radiographic imaging procedure	M	
G3.5	Assess patient for hypersensitivity/contra indications to the contrast media		
G3.6	Select, prepare and administer contrast media	M	
G3.7	Monitor and respond to patient's adverse reactions to contrast media	M	
G3.8	Adapt positioning requirements according to patient's condition	M	

		CL	
G3.9	Evaluate quality of images for the purpose of diagnostic interpretation	M	
G3.10	Obtain additional images as required	M	
G3.11	Counsel patient with respect to post procedural care	M	
<b>G 4</b>	<b>Perform Imaging Procedure of the Stomach</b>	<b>M</b>	
G4.1	Understand the gross anatomy, relational anatomy and physiology of the stomach	M	
G4.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	M	
G4.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	M	
G4.4	Plan the radiographic imaging procedure	M	
G4.5	Determine dietary preparation for gastrointestinal tract	M	
G4.6	Assess patient for hypersensitivity/contra indications to the contrast media	M	
G4.7	Select, prepare and administer contrast media	M	
G4.8	Monitor and respond to patient's adverse reactions to contrast media	M	
G4.9	Position the patient using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Anteroposterior (AP) - Posteroanterior (PA) - Trendelenberg - Anterior Oblique - Posterior Oblique - Lateral	M	
G4.10	Adapt positioning requirements according to patient's condition	M	
G4.11	Evaluate quality of images for the purpose of diagnostic interpretation	M	
G4.12	Obtain additional images as required	M	
G4.13	Counsel patient with respect to post procedural care	M	
<b>G 5</b>	<b>Perform Imaging Procedure of the Small Bowel</b>	<b>M</b>	
G5.1	Understand the gross anatomy, relational anatomy and physiology of the small bowel	M	
G5.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	M	
G5.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	M	
G5.4	Plan the radiographic imaging procedure	M	
G5.5	Determine gastrointestinal tract preparation	M	
G5.6	Assess patient for hypersensitivity/contra indications to the contrast media	M	

		CL	
G5.7	Select, prepare and administer contrast media	M	
G5.8	Monitor and respond to patient's adverse reactions to contrast media	M	
G5.9	Position the patient using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for demonstration of the required anatomical structures/pathologies - Anteroposterior (AP) - Posteroanterior (PA)	M	
G5.10	Adapt positioning requirements according to patient's condition	M	
G5.11	Evaluate quality of images for the purpose of diagnostic interpretation	M	
G5.12	Obtain additional images as required	M	
G5.13	Counsel patient with respect to post procedural care	M	
<b>G 6</b>	<b>Perform Imaging Procedure of the Large Bowel</b>	<b>M</b>	
G6.1	Understand the gross anatomy, relational anatomy and physiology of the large bowel	M	
G6.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	M	
G6.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	M	
G6.4	Plan the radiographic imaging procedure	M	
G6.5	Determine gastrointestinal tract preparation	M	
G6.6	Assess patient for hypersensitivity/contra indications to the contrast media	M	
G6.7	Select, prepare and administer contrast media	M	
G6.8	Monitor and respond to patient's adverse reactions to contrast media	M	
G6.9	Prepare and assist in the administration of antispasmodic agents	M	
G6.10	Position the patient using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Anteroposterior (AP) - Posteroanterior (PA) - Trendelenberg - Anteroposterior (AP) axial - Posteroanterior (AP) axial - Lateral - Posterior oblique - Anterior oblique - Erect - Lateral decubitus	M	
G6.11	Adapt positioning requirements according to patient's condition	M	
G6.12	Evaluate quality of images for the purpose of diagnostic interpretation	M	

		<b>CL</b>	
G6.13	Obtain additional images as required	M	
G6.14	Counsel patient with respect to post procedural care	M	
<b>G 7</b>	<b>Perform Imaging Procedure of the ERCP</b>	<b>L</b>	
G7.1	Understand the gross anatomy, relational anatomy and physiology of the biliary system	L	
G7.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	L	
G7.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	L	
G7.4	Plan the radiographic imaging procedure	L	
G7.5	Determine gastrointestinal tract preparation	L	
G7.6	Select and prepare contrast media	L	
G7.7	Monitor and respond to patient's adverse reactions to contrast media	L	
G7.8	Assist in positioning the patient using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Anteroposterior (AP) - Anterior oblique - Posterior oblique - Lateral	L	
G7.9	Adapt positioning requirements according to patient's condition	L	
G7.10	Evaluate quality of images for the purpose of diagnostic interpretation	L	
G7.11	Obtain additional images as required	L	
G7.12	Counsel patient with respect to post procedural care	L	

## MODULE H IMAGING PROCEDURES of the Respiratory System

		CL	
<b>H 1</b>	<b>Perform Imaging Procedures of the Respiratory System</b>		
H1.1	Understand the pathology and anomalies related to the respiratory system, with respect to: patient signs and symptoms, clinical presentation and diagnostic image presentation	H	
H1.2	Interview the patient to verify and complement clinical history	H	
H1.3	Prioritize examination according to patient's medical status and resources available	H	
H1.4	Assess and monitor the patient's condition	H	
<b>H 2</b>	<b>Perform Imaging Procedure of the Soft Tissue Neck (Pharynx/Larynx/Trachea)</b>	<b>M</b>	
H2.1	Understand the gross anatomy, relational anatomy and physiology of the pharynx, larynx and trachea	M	
H2.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	M	
H2.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	M	
H2.4	Plan the radiographic imaging procedure	M	
H2.5	Position the patient using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Anteroposterior (AP) - Lateral	M	
H2.6	Adapt positioning requirements according to examination environment	M	
H2.7	Evaluate quality of images for the purpose of diagnostic interpretation	M	
H2.8	Obtain additional images as required	M	
<b>H 3</b>	<b>Perform Imaging Procedure of the Chest</b>	<b>H</b>	
H3.1	Understand the gross anatomy, relational anatomy and physiology of the thorax	H	
H3.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	H	
H3.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	H	
H3.4	Plan the radiographic imaging procedure	H	

		CL	
H3.5	Position the patient using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies <ul style="list-style-type: none"> <li>- Anteroposterior (AP) (recumbent/erect)</li> <li>- Posteroanterior (PA)</li> <li>- Lateral; Anteroposterior (AP) axial</li> <li>- Posteroanterior (AP) axial</li> <li>- Anteroposterior (AP) Lordotic</li> <li>- Lateral decubitus</li> </ul>	H	
H3.6	Adapt positioning requirements according to patient's condition	H	
H3.7	Adapt positioning requirements according to examination environment	H	
H3.8	Evaluate quality of image for the purpose of diagnostic interpretation	H	
H3.9	Obtain additional images as required	H	

## MODULE I IMAGING PROCEDURES of the Urinary System

		CL	
<b>I 1</b>	<b>Perform Imaging Procedures of the Urinary System</b>		
I1.1	Understand the pathology and anomalies related to the urinary system and male reproductive system, with respect to: patient signs and symptoms, clinical presentation and diagnostic image presentation	H	
I1.2	Interview the patient to verify and complement the clinical history	H	
I1.3	Prioritize examination according to patient's medical status and resources available	H	
I1.4	Assess and monitor the patient's condition	H	
<b>I 2</b>	<b>Perform Imaging Procedure of the Non Contrast Imaging of Kidneys, Ureters, Bladder (KUB)</b>	<b>H</b>	
I2.1	Understand the gross anatomy, relational anatomy and physiology of the abdomen	H	
I2.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	H	
I2.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	H	
I2.4	Plan the radiographic imaging procedure	H	
I2.5	Position the abdomen using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Anteroposterior (AP) (recumbent/erect position) - Anteroposterior (AP) axial	H	
I2.6	Adapt positioning requirements according to patient's condition	H	
I2.7	Evaluate quality of images for the purpose of diagnostic interpretation	H	
I2.8	Obtain additional images as required	H	
<b>I 3</b>	<b>Perform Imaging Procedure for Intravenous Urography</b>		
I3.1	Understand the gross anatomy, relational anatomy and physiology of the urinary system		
I3.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies		
I3.3	Utilize the clinical information provided to adapt the requested examination to an individual patient		
I3.4	Plan the radiographic imaging procedure		
I3.5	Verify patient's bowel preparation		
I3.6	Assess patient for hypersensitivity/contra indications to the contrast media		
I3.7	Select and prepare contrast media		
I3.8	Perform venipuncture and administer contrast media		
I3.9	Monitor and respond to patient's adverse reactions to contrast media		

		CL	
I3.10	Position the patient using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Anteroposterior (AP) - Posteroanterior (PA) - Anteroposterior (AP) axial - Erect - Posterior obliques - Anteroposterior (AP) post void		
I3.11	Adapt positioning requirements according to patient's condition		
I3.12	Adapt positioning requirements according to examination environment		
I3.13	Evaluate quality of images for the purpose of diagnostic interpretation		
I3.14	Obtain additional images as required		
I3.15	Counsel patient with respect to post procedural care		
<b>I 4</b>	<b>Perform Imaging Procedure for Cystourethrography</b>	<b>L</b>	
I4.1	Understand the gross anatomy, relational anatomy and physiology of the urinary system	L	
I4.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	L	
I4.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	L	
I4.4	Plan the radiographic imaging procedure	L	
I4.5	Verify bladder preparation	L	
I4.6	Assess patient for hypersensitivity/contra indications to the contrast media	L	
I4.7	Select and prepare contrast media	L	
I4.8	Perform / participate in urinary catheter insertion	L	
I4.9	Administer contrast media	L	
I4.10	Monitor and respond to patient's adverse reactions to contrast media	L	
I4.11	Position the patient using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Anteroposterior (AP) - Trendelenberg - Lateral - Posterior obliques	L	
I4.12	Adapt positioning requirements according to patient's condition	L	
I4.13	Evaluate quality of images for the purpose of diagnostic interpretation	L	
I4.14	Obtain additional images as required	L	
I4.15	Counsel patient with respect to post procedural care	L	

## MODULE J IMAGING PROCEDURES of the Reproductive System

		CL	
<b>J 1</b>	<b>Perform Imaging Procedures of the Reproductive System</b>		
J1.1	Understand the pathology and anomalies related to the female reproductive system, with respect to: patient signs and symptoms, clinical presentation and diagnostic image presentation	H	
J1.2	Interview patient to verify and complement clinical history	H	
J1.3	Prioritize examination according to patient's medical status and resources available	H	
J1.4	Assess and monitor patients condition	H	
<b>J 2</b>	<b>Perform Imaging Procedure for Hysterosalpingography</b>	<b>L</b>	
J2.1	Understand the gross anatomy, relational anatomy and physiology of the female reproductive system	L	
J2.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	L	
J2.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	L	
J2.4	Explain the procedure	L	
J2.5	Prepare sterile tray	L	
J2.6	Verify bladder preparation	L	
J2.7	Select contrast media	L	
J2.8	Assess patient for hypersensitivity/contra indications to the contrast media	L	
J2.9	Monitor and respond to patient's adverse reactions to contrast media	L	
J2.10	Position the patient using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Anteroposterior (AP) - Posterior obliques	L	
J2.11	Evaluate quality of images for the purpose of diagnostic interpretation	L	
J2.12	Counsel patient with respect to post procedural care	L	
<b>J 3</b>	<b>Participate in Mammographic Imaging Procedure</b>	<b>L</b>	
J3.1	Understand the gross anatomy, relational anatomy and physiology of the breast	L	
J3.2	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	L	
J3.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	L	
J3.4	Explain the procedure	L	
J3.5	Assess patient for contraindications	L	

		CL	
J3.6	*Assist in the positioning of the patient using anatomical landmarks, relational anatomy, central ray, collimation and image receptor for the demonstration of the required anatomical structures/pathologies - Craniocaudal - Mediolateral obliques	L	
J3.7	Verify proper exposure factors based on evaluation of patient	L	
J3.8	Evaluate quality of acquired images for the purpose of diagnostic interpretation	L	
J3.9	Counsel patient with respect to post procedural care	L	
* NOTE: It is recognized that some students will not have the opportunity to position patients for a mammographic procedure, however students are required to have the knowledge related to the procedure.			

## MODULE K IMAGING PROCEDURES in Computed Tomography

		CL	
<b>K 1</b>	<b>Perform Computed Tomographic Imaging Procedures</b>	<b>M</b>	
K1.1	Understand the gross anatomy, relational anatomy and physiology of the head, chest, spine and abdomen	M	
K1.2	Understand the pathology and anomalies related to the head, chest, spine and abdomen, with respect to: patient signs and symptoms, clinical presentation and diagnostic image presentation	M	
K1.3	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	M	
K1.4	Plan the radiographic imaging procedure	M	
K1.5	Assess patient for hypersensitivity/contra indications to the contrast media	M	
K1.6	Select and prepare contrast media	M	
K1.7	Perform venipuncture and administer contrast media	M	
K1.8	Assist with the administration of drugs acting on the central nervous system	M	
K1.9	Use automatic injection devices when required	M	
K1.10	Verify and set injection parameters on automatic injector	M	
K1.11	Monitor and respond to adverse reactions to contrast media	M	
K1.12	Position the patient using anatomical landmarks, relational anatomy and set parameters for the demonstration of the required anatomical structures/pathologies <ul style="list-style-type: none"> <li>- Head (unenhanced/enhanced)</li> <li>- Chest (unenhanced/enhanced)</li> <li>- Spine (unenhanced)</li> <li>- Abdomen (unenhanced/enhanced)</li> </ul>	M	
K1.13	Adapt positioning requirements according to patient's conditions	M	
K1.14	Evaluate quality of images for the purpose of diagnostic interpretation	M	
K1.15	Participate in processing and post processing of images	M	
K1.16	Recognize the appearance of the most common pathologies seen on CT scans of the head, chest, spine and abdomen	M	
K1.17	Obtain additional images as required	M	
K1.18	Counsel patient with respect to post procedural care	M	

## MODULE L IMAGING PROCEDURES for Bone Mineral Density

		CL	
<b>L 1</b>	<b>Perform Bone Mineral Density Imaging Procedures</b>	<b>L</b>	
L1.1	Evaluate the correlation between clinical information provided and the requested examination	L	
L1.2	Plan the bone mineral density imaging procedure	L	
L1.3	Educate patients and their support persons to enable them to make informed decisions	L	
L1.4	Position the patient on bone mineral density scanning bed	L	
L1.5	Use anatomical landmarks and relational anatomy to best demonstrate anatomical structures/pathologies	L	
L1.6	Adjust procedure according to patient's condition	L	
L1.7	Select acquisition parameters	L	
L1.8	Perform procedure in accordance with protocol	L	
L1.9	Operate equipment for image/data acquisition	L	
L1.10	Evaluate anatomy, physiology and patient position on the image to determine if further images/data are required	L	
L1.11	Recognize normal results and variants	L	
L1.12	Recognize pathologies/abnormal results	L	
L1.13	Process to optimize the image	L	
L1.14	Perform image/data analysis and manipulation	L	

## MODULE M IMAGING PROCEDURES for Vascular/Interventional Studies

		CL	
<b>M 1</b>	<b>Participate in Vascular /Interventional Imaging Procedures</b>	<b>L</b>	
M1.1	Understand the gross anatomy, relational anatomy and physiology as related to vascular/interventional studies	L	
M1.2	Understand the pathology and anomalies related to the vascular/interventional studies, with respect to: patient signs and symptoms, clinical presentation and diagnostic image presentation	L	
M1.3	Utilize the clinical information provided to adapt the requested examination to an individual patient	L	
M1.4	Demonstrate an understanding of related disciplines in order to review data available from reports and/or images of previous studies	L	
M1.5	Assess patient for hypersensitivity/contra indications to the contrast media	L	
M1.6	Use automatic injection devices when required	L	
M1.7	Verify and set injection parameters on automatic injector	L	
M1.8	Prepare for the administration of medications	L	
M1.9	Monitor and respond to adverse reactions to contrast media	L	
M1.10	Participate in vascular/interventional imaging	L	
M1.11	Evaluate quality of images for the purpose of diagnostic interpretation	L	
M1.12	Participate in processing and post processing of images	L	
M1.13	Counsel patient with respect to post procedural care	L	