



Brian P. Kemp
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Matt Arthur
Commissioner

Radiologic Technology IFCC Meeting

Date: Wednesday, November 20th

Time: 10:00am until 4:00pm

Location: Technical College System of GA ~ System Office

Meeting Facilitator: Sasha Kahiga-CPS, TCSG

Recorder: Sasha Kahiga- CPS, TCSG

Attendees

1. Sara Watson- Clinical Coordinator, Albany Technical College
2. Stuart Frew- Program Chair, Athens Technical College
3. Glenn Henry- Dean of Life Science & Public Safety, Athens Technical College
4. Danielle Hibbert-Program Director, Atlanta Technical College
5. Kristie Searcy- Program Director, Augusta Technical College
6. Amanda Cobb- Clinical Coordinator, Central GA Technical College
7. Dona Yeomans- Instructor, Coastal Pines Technical College
8. Kimberly Whitaker- Program Director, Columbus Technical College
9. Jennifer Eldridge- Clinical Coordinator, Columbus Technical College
10. Susan Wheat- Program Director, GA Northwestern Technical College
11. Jennifer Turner- Program Director, Gwinnett Technical College
12. Robert Wells- Program Director, Lanier Technical College
13. Erin Giddens- Program Director, Oconee Fall Line Technical College
14. Tara Powell- Program Director, Southeastern Technical College
15. Dana Bresser- Program Director, Southern Crescent Technical College
16. Anthony Turpin- Program Chair, Southern Regional Technical College
17. Jennifer Lathern- Program Director, West GA Technical College
18. Jennifer Ray- Program Coordinator, Wiregrass Technical College

WebEx Attendees

1. Connie Young- Program Chair, Central GA Technical College
2. Jan Martin- Program Director, Ogeechee Technical College
3. S. Coogle
4. Amanda Spoosey- Instructor, Gwinnett Technical College
5. Jamie Bailey- Program Director, Chattahoochee Technical College
6. Buffie Spencer- Program Chair, Southern Regional Technical College
7. Tarika Akery- Clinical Coordinator, Southern Regional Technical College

Meeting began with Sasha Kahiga welcoming everyone and introducing herself. She explained to the group that initially, the Radiologic Technology program was scheduled to undergo a program review, but due to many accrediting and regulatory agencies, not all Allied Health programs will under an extensive program review similar to other programs. Sasha stated that since the Radiologic Technology IFCC hadn't met in a few years and their last IFCC meeting was canceled due to the start of the program reviews, it was best for the group to meet. Sasha stated that the group expressed their need to update the curriculum and ensure that the curriculum is aligned with the Joint Review Committee on Education in Radiologic Technology (JRCERT) and the American Registry of Radiologic Technologists (ARRT) Radiography Examination.

Sasha explained to the group that they will review each RADT course currently listed within the degree and make the suggested changes. She stated that she would copy a new version of the most recent version of the course within KMS, make the changes and conduct an electronic vote to ensure input from the entire IFCC. She further explained that once the IFCC votes and all is finalized, she make the new course version visible to the colleges.

Sasha asked the group to began the review and informed the WebEx attendees that they could either chime-in with suggestions or questions via audio or chat component. The group started the discussion and made the following changes,

RADT 1010: Introduction to Radiology

1) Competency #6: Basic Principles of Exposures

- Learning Outcome #2 rewritten as: Identify concepts and terms relating to exposure and control factors, such as contrast, exposure equations, directional terms, and critique points of radiographs.

2) Competency #7: Equipment Introduction

- Learning Outcome #1 rewritten as: Identify basic radiographic and fluoroscopic equipment.
- Learning Outcome #2 rewritten as: Identify basic imaging components of CR and DR.
- Learning Outcome #3 rewritten as: Identify basic radiographic accessories such as calipers, cushions, grids, and other accessories.

3) Competency #8: Health Care Delivery Systems

- Learning Outcome #3 rewritten as: Describe each of the radiologic modalities such as CT, Interventional Radiography, Nuclear Medicine, Magnetic Resonance Imaging, Sonography, Radiation Therapy, and Mammography.

4) Competency #12: Pharmacology/Contrast Agents/Media

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- Learning Outcome #10 was a duplication of Learning Outcome #9 and was removed.

RADT 1030: Radiographic Procedures I

1) Competency #2: Anatomy and Routine Projections of Lower Extremities

- Learning Outcome #3 rewritten as: The student will explain the structures visualized, functions demonstrated, and the general positioning considerations involved clinical simulations for routine and special projection/positions of the lower extremities.

RADT 1060: Radiographic Procedures II

1) Competency #2: Anatomy and Routine Projections of the Spine

- Learning Outcome #3 rewritten as: The student will explain the structures visualized, functions demonstrated, and the general positioning considerations involved clinical simulations for routine and special views of the spine.

2) Competency #4: Genitourinary (GU) Procedures

- Learning Outcome #2: Describe routine and special projections/positions of the GU anatomy in terms of structures visualized, functions demonstrated, and general positioning considerations.

3) Competency #5: Biliary System Procedures

- Learning Outcome #4 rewritten as: The student will apply knowledge of radiographic procedures related to the biliary system via performance in a laboratory environment.

RADT 1065: Radiologic Science

1) Competency #1: X-Ray Characteristics

- Learning Outcome #9 was rewritten as: Describe radioactivity and radioactive decay in terms of alpha, beta, and gamma emission.

RADT 1075: Radiographic Imaging

1) Course description

- The course description was rewritten as: The content of this course introduces factors that govern and influence the production of the radiographic image using digital radiographic equipment found in diagnostic radiology. Emphasis will be placed on **the knowledge** and techniques required to produce high quality diagnostic radiographic images. Topics include Image quality (radiographic density; radiographic contrast; recorded detail; distortion; grids; image receptors and holders (analog and digital); processing considerations (analog and digital); image acquisition (analog, digital, and PACS); image analysis; image artifacts (analog and digital); Guidelines for selecting exposure factors and evaluating images within a digital system will assist students to bridge between film-based

and digital imaging systems. Factors that impact image acquisition, display, archiving and retrieval are discussed. Laboratory experiences will demonstrate applications of theoretical principles and concepts.

2) Course Length

- The Lab Type of Internship has been removed and identified as a Regular Lab

3) Competency #1: Principles of Imaging and Image Quality

- Learning Outcome #2 was rewritten as: Describe receptor exposure, contrast, spatial resolution, and distortion.
- Learning Outcome #3 was rewritten as: Identify and analyze the relationships of factors that control and affect receptor exposure.
- Learning Outcome #4 was rewritten as: Identify and analyze the relationship of factors that control and affect contrast.
- Learning Outcome #5 was rewritten as: Identify and analyze the relationships of factors that control and affect spatial resolution.
- Learning Outcome #8 was rewritten as: Perform calculations to determine image magnification and percent magnification.
- Learning Outcome #9: Summarize the relationship of factors affecting exposure latitude and film latitude; it was REMOVED.
- Learning Outcome #10 was rewritten as: Apply conversion factors for changes in the following areas: distance (inverse square law), grid, mAs reciprocity, exposure maintenance, and the 15 percent rule.
- Learning Outcome #11 was rewritten as: Describe the basic principles of digital radiography and the terminology associated with digital imaging systems.
- Learning Outcome #12 was rewritten as: Define digital imaging characteristics of receptor exposure, contrast, spatial resolution, and distortion.
- Learning Outcome #17 was rewritten as: Identify and compare grid types and identify the most appropriate grid for a given clinical situation.
- Learning Outcome #18 was rewritten as: Interpret grid efficiency in terms of grid ratio and frequency.

4) Competency #2: Criteria for Image Evaluation

- Learning Outcome #7: Identify causes of film screen image fog (film age, chemical, radiation, temperature safelight); was REMOVED.

5) Competency #3 was rewritten as: Image Acquisition and Processing

- Learning Outcome #1: Explain film-screen latent image formation; it was REMOVED.
- Learning Outcome #2: Describe film-screen processing and film storage; it was REMOVED.
- Learning Outcome #3: Discuss the steps of the processing cycle (develop, fix, wash, dry) and effects on image quality; it was REMOVED.
- Learning Outcome #4: Identify the purpose of a daily quality control program for processors; it was REMOVED.

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- Learning Outcome #5: Identify types and causes of film-screen image artifacts; was REMOVED.
 - Learning Outcome #13: Compare dynamic range to the latitude of a screen/film receptor system to that of a digital radiography system; it was REMOVED.
- 6) Competency #5 was rewritten as: Imaging Systems**
- Learning Outcome #3 was rewritten as: Describe the components of imaging informatics (PACS, RIS, HIS, DICOM, and EMR).
 - Learning Outcome #9 was rewritten as: Discuss and define digital image processing, to include equalization, smoothing, electronic masking, edge enhancement, grayscale (bit depth " LUT), quantization, image stitching, VOI, and ROI.

RADT 1085: Radiologic Equipment

1) Course Description

- The course description was rewritten as: Content establishes a knowledge base in radiographic, fluoroscopic, and mobile equipment requirements and design. The content also provides a basic knowledge of Automatic Exposure Control (AEC) devices, beam restriction, filtration, quality control, and quality management principles of digital systems. Laboratory experiences will demonstrate applications of theoretical principles and concepts.

2) Competency #1: Radiographic Imaging Equipment Operation

- Learning Outcome #14 was rewritten as: Demonstrate proper use of AEC devices, to include radiation detectors, back-up timer and exposure adjustment (e.g., +1 or -1).

3) Competency #3: Fluoroscopy (Image Intensified Conventional and Digital Fluoroscopy)

- Learning Outcome #5 was rewritten as: Discuss automatic brightness control (ABC), automatic exposure rate control (AERC), image intensifier positioning, magnification mode, kerma display, and last image hold.

RADT 1200: Principles of Radiation Biology and Protection

1) Competency #1: Radiation Detection and Measurement

- Learning Outcome #1 was rewritten as: Define terms used to measure ionizing radiation such as C/kg, seivert, air kerma and gray.

2) Competency #2: Patient Protection

- Learning Outcome #9: Describe DAP and radiographic dose documentation; it was ADDED.

3) Competency #3: Personnel Protection

- Learning Outcome #6 was rewritten as: Explain how patient immobilization devices are used to reduce personnel exposure during radiographic, fluoroscopic, mobile, and surgical procedures.

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- Learning Outcome #7: Discuss **the handling** and disposal of radioactive material; was ADDED.
- 4) **Competency #4: Absorbed Dose Equivalencies**
 - Learning Outcome #2 was rewritten as: Determine dose equivalent in terms of SI units when given the quality factor and absorbed dose for different ionizing radiations.
- 5) **Competency #5: Agencies and Regulations**
 - Learning Outcome #3 was rewritten as: Explain two purposes of Public Law 97-35 (Patient Consumer Radiation Health and **Safety** Act of 1981).
- 6) **Competency #9: Effects of Radiation**
 - Learning Outcome #6 was rewritten as: Distinguish between stochastic and deterministic (early and late tissue reactions) effects of ionizing radiation.

RADT 1320: Clinical Radiography I

1) Course Description

- The course **description** was rewritten as: Introduces students to the hospital clinical setting and provides an opportunity for students to participate in or observe radiographic procedures. Topics include but not limited to: orientation to hospital areas and procedures; orientation to mobile/surgery; orientation to radiography and fluoroscopy; participation in and/or observation of procedures related to body cavities, the shoulder girdle, and upper extremities. Activities of students are under direct and indirect supervision.

2) Competency #9: Patient Care was ADDED

- Learning Outcome #1: Execute the priorities required in daily clinical practice.
- Learning Outcome #2: Execute medical imaging procedures under **the appropriate** level of supervision.
- Learning Outcome #3: Recognize the influence of professional values on patient care.
- Learning Outcome #4: Integrate the use of appropriate and effective written, oral, and nonverbal communication with patients, the public and members of the healthcare team.
- Learning Outcome #5: Provide patient-centered, clinically effective care for all patients regardless of age, gender, disability, special needs, ethnicity, or culture

RADT 1330: Clinical Radiography II

1) Course Description

- The course description was rewritten as: Continues introductory student learning experiences in the hospital setting. Topics include but not limited to: equipment utilization; exposure techniques; attend to and/or observation of routine projections of the lower extremities, pelvic girdle, and spine; attend to and/or observation of procedures related to the gastrointestinal (GI), genitourinary (GU),

and biliary systems; and attend to and/or observation of procedure related to minor radiologic procedures and patient care. Execution of radiographic procedures will be conducted under direct and indirect supervision.

2) Competency #1: Equipment Utilization

- Learning Outcome #5 was rewritten as: Inspect and clean image receptors regularly to identify and remove causes of artifacts.
- Learning Outcome #6 was rewritten as: Recognize and report equipment malfunctions.
- Learning Outcome #7: Note difficulties experienced, which might assist in locating the cause of the malfunction; it was REMOVED.
- Learning Outcome #8: Monitor the performance of the automatic processor; was REMOVED
- Learning Outcome #9 was rewritten as: Clean, wash, disinfect, and/or sterilize the facilities and equipment (e.g., image receptors, tabletops) and dispose of contaminated items in preparation for the next examination.

3) Competency #2: Exposure Techniques

- Learning Outcome #1 was rewritten as: Properly handle and store image receptors.
- Learning Outcome #2: Imprint proper identification information onto the film using either the radiographic, photographic, or light imprinter method; was REMOVED.
- Learning Outcome #3: Process exposed film by unloading the cassette and feeding it into the automatic processor; it was REMOVED.
- Learning Outcome #4: Reload cassettes by selecting film of proper size and type; was REMOVED.
- Learning Outcome #5 was rewritten as: Record required information on the request form following performance of examination (may include technologist identification, patient data, billing codes, technique or other information as required by department protocol.)
- Learning Outcome #6 was rewritten as: Combine radiographic requisition and images for interpretation and archive.
- Learning Outcome #11 was rewritten as: Evaluate images to make certain that radiographs contain proper identification and are of diagnostic quality.

4) Competency #6: Attend to and/or Observation of Procedures Related to Minor Radiologic Procedures

- Learning Outcome #1 was rewritten as: Attend and/or observe special minor radiographic procedures such as arthrograms, bronchograms, endoscopic retrograde cholangiopancreatograms (ERCPs) & myelograms.
- Learning Outcome #2 was rewritten as: Attend and/or observe the preparation for use, operation, and maintenance of equipment used to perform special minor

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radiographic procedures such as arthrograms, bronchograms, endoscopic retrograde cholangiopancreatogram (ERCPS) & myelograms.

- Learning Outcome #3 was rewritten as: Attend and/or observe the use and maintenance of special radiographic equipment such as image intensifiers, magnification radiographic equipment, bi-plane equipment, recording equipment, injectors, program selectors, and other miscellaneous radiographic equipment.
- Learning Outcome #4 was rewritten as: Attend and/or observe the preparation of patients undergoing special minor radiographic procedures such as arthrograms, bronchograms, endoscopic retrograde cholangiopancreatogram (ERCPS) & myelograms.
- Learning Outcome #9: Attend and/or observe special radiographic procedures such as cerebral, visceral, peripheral, and digital subtraction angiograms; it was REMOVED.
- Learning Outcome #10: Observe **catheterization** techniques; it was REMOVED.
- Learning Outcome #11: Observe the Seldinger technique; it was REMOVED.
- Learning Outcome #12: Attend and/or observe interventional techniques such as infusion therapy, extractions, embolizations, PTA/PTLAs, and percutaneous needle studies; it was REMOVED.

5) Competency #7: Patient Care was ADDED

- Learning Outcome #1: Execute the priorities required in daily clinical practice.
- Learning Outcome #2: Execute medical imaging procedures under **the appropriate** level of supervision.
- Learning Outcome #3: Recognize the influence of professional values on patient care.
- Learning Outcome #4: Integrate the use of appropriate and effective written, oral, and nonverbal communication with patients, the public and members of the healthcare team.
- Learning Outcome #5: Provide patient-centered, clinically effective care for all patients regardless of age, gender, disability, special needs, ethnicity, or culture.

RADT 2090: Radiographic Procedures III

1) Competency #1: Anatomy and Routine **Projections of the Cranium**

- Learning Outcome #3: Explain basic CT acquisition protocol for the head; it was REMOVED.

2) Competency #3: Anatomy and Routine Projections of the Sinuses

- Learning Outcome #5 was rewritten as: Evaluate sinus positioning accuracy, image quality, and anatomical structures visualized on the image.

3) Competency #4: Special Radiographic Procedures

- Learning Outcome #1 was rewritten as: Define terms and phrases related to special procedures to include: a) arthrogram; b) endoscopic retrograde

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cholangiopancreatogram (ERCP); c) myelogram; d) surgical cholangiogram; and e) hysterosalpingogram.

- Learning Outcome #2 was rewritten as: Discuss the indications and contraindications for the following procedures to include: a) arthrogram; b) endoscopic retrograde cholangiopancreatogram (ERCP); c) myelogram; d) surgical cholangiogram; and e) hysterosalpingogram.
- Learning Outcome #3 was rewritten as: Discuss imaging, equipment, and supplies used for the following procedures to include: a) arthrogram; b) endoscopic retrograde cholangiopancreatogram (ERCP); c) myelogram; d) surgical cholangiogram; and e) hysterosalpingogram
- Learning Outcome #4 was rewritten as: Explain various minor radiographic procedures, describe the contrast medium utilized in terms of type, administration method, and quantity.
- Learning Outcome #8 was rewritten as: Define terms and phrases related to special procedures to include: a) arthrogram; b) endoscopic retrograde cholangiopancreatogram (ERCP); c) myelogram; d) surgical cholangiogram; and e) hysterosalpingogram.

RADT 2340: Clinical Radiography III

1) Course Description

- Course Description was rewritten as: Provides students with continued hospital setting work experience. Students continue to develop proficiency in executing procedures introduced in Radiographic Procedures. Topics include but not limited to: patient care; behavioral and social competencies; performance and/or observation of minor special procedures, special equipment use, and participation in and/or observation of cranial and facial radiography. Execution of radiographic procedures will be conducted under direct and indirect supervision.

2) Competency #1: Patient Care

- Learning Outcome #1 was rewritten as: Execute the priorities required in daily clinical practice.
- Learning Outcome #2 was rewritten as: Execute medical imaging procedures under appropriate level of supervision.
- Learning Outcome #3 was rewritten as: Recognize the influence of professional values on patient care.
- Learning Outcome #4 was rewritten as: Integrate the use of appropriate and effective written, oral, and nonverbal communication with patients, the public and members of the healthcare team.
- Learning Outcome #5 was rewritten as: Provide patient-centered, clinically effective care for all patients regardless of age, gender, disability, special needs, ethnicity, or culture.

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- Learning Outcome #6: Perform "start up" and/or "shutdown" procedures on the automatic processor (e.g., adjust water, removal and cleaning of "cross-over" bars); was REMOVED.
- Learning Outcome #7: Recognize malfunctions in the automatic processor; was REMOVED.
- Learning Outcome #8: Note difficulties experienced which might assist in locating the cause of the malfunction; was REMOVED.
- Learning Outcome #9: Report malfunctions in the automatic processor; was REMOVED.
- Learning Outcome #10: Monitor the performance of the automatic processor using sensitometry; was REMOVED.
- Learning Outcome #11: Clean, wash, disinfect, and/or sterilize facilities and equipment (e.g., cassettes, tabletops) and dispose of contaminated items in preparation for the next examination; was REMOVED.
- Learning Outcome 12: Warm-up the x-ray tube to achieve proper operating conditions by following the manufacturer's prescribed sequence of steps; was REMOVED.

RADT 2260: Radiologic Technology Review

1) Course Description

- Course Description was rewritten as: Provides a review of basic knowledge from previous courses and helps the student prepare for national certification examinations for radiographers. Topics include: Patient Care (Patient Interactions and Management), Safety (Radiation Physics, Radiobiology and Radiation Protection), Image Production (Image Acquisition, Technical Evaluation, Equipment Operation and Quality Assurance), and Procedures (Head, Spine, Pelvis, Thorax, Abdomen and Extremities).

2) Competency #1: Image Production and Evaluation was renamed as Patient Care

- Learning Outcomes have been rewritten as the following;
 - 1.The student will discuss patient's rights, including informed consent, confidentiality, Patient's Bill of Rights, etc.
 - 2.The student will identify legal issues when performing radiography, including patient ID verification, common legal terminology, legal doctrines, use of restraints, and manipulation of electronic data.
 - 3.The student will list the ARRT Standards of Ethics.
 - 4.The student will describe various types of patient communication, including verbal and non-verbal forms.
 - 5.The student will identify various challenges to patient communication (i.e. language barriers, cultural and social factors, physical or mental impairment, age, etc.)

6. The student will demonstrate proper patient education, including explanation of current procedure, verifying informed consent, pre- and post-examination instructions and responding to inquiries about other imaging modalities.
7. The student will review the principles of body mechanics applicable to patient care.
8. The student will demonstrate procedures for patient transfer such as table to table, table to wheelchair, wheelchair to bed, bed to stretcher, the three-man lift, and draw sheet lift.
9. The student will describe the proper procedure for assisting patients with medical equipment, including infusion pumps, oxygen delivery systems, nasogastric tubes, and urinary catheters.
10. The student will demonstrate routine patient monitoring for vital signs, physical signs and symptoms, fall prevention and variance documentation.
11. The student will identify the symptoms of common medical emergencies, including cardiac arrest, anaphylactic shock, convulsion, seizure, hemorrhage, apnea, emesis, aspiration, fractures, and diabetic coma/insulin reaction.
12. The student will discuss the cycle of infection in healthcare settings and identify modes of transmission (direct vs. indirect).
13. The student will describe the disinfection and sterilization procedures in terms of types and methods used when given various radiographic procedures and patient information.
14. The student will list the CDC Standard Precautions (hand hygiene, PPE, safe injection practices, safe, disposal of contaminated materials, etc.).
15. The student will define transmission-based precautions (contact, droplet and airborne) and other additional precautions (neutropenic precautions and nosocomial infections).
16. The student will identify various hazardous materials by types, handling and disposal requirements, as listed on material safety data sheets (including disposal of radioactive materials).
17. The student will discuss patient preparation in terms patient history, medication reconciliation, premedication and sequencing/scheduling of exams per the patient's pharmacological history.
18. The student will define various routes of drug administration (i.e. IV, oral, etc.).
19. The student will demonstrate proper venipuncture technique.
20. The student will list various types of contrast media and their appropriateness to different ordered exams.

21. The student will describe the different complications or adverse reactions to contrast media.

3) Competency #2: Radiographic Procedures was renamed as Safety

▪ **Learning Outcomes have been rewritten as the following;**

1. The student will discuss the principles of x-ray production and target interactions within the x-ray tube (bremsstrahlung and characteristic).
2. The student will describe the x-ray beam in terms of quality and quantity and factors that affect each.
3. The student will define the types of x-ray photon interactions with matter and attenuation by various tissues.
4. The student will identify the SI units of measurement for radiation for absorbed dose, dose equivalent, exposure, effective dose and air kerma.
5. The student will discuss the radiosensitivity of various biologic tissue in terms of dose-response relationships, LET, RBE, cell survival and oxygen effect.
6. The student will list somatic radiation effects in terms of both short- and long-term effects.
7. The student will define the major phases of acute radiation sickness (hemopoietic, gastrointestinal and CNS syndromes).
8. The student will describe embryonic/fetal risks to radiation exposure and the genetic impact of exposure when it comes to gonadal shielding.
9. The student will discuss minimizing patient exposure in terms of exposure factors, shielding, beam restriction, filtration, patient considerations, dose documentation, types of image receptors, use of grids, fluoroscopy considerations, and use of the dose area product measurement.
10. The student will discuss personnel protection in terms of radiation source, basic protection methods, protective devices, special considerations with mobile/fluoroscopy units, radiation monitoring devices and NCRP recommendations for dose limits (occupational, public and embryo/fetus exposure, etc.).

4) Competency #3: Anatomy, Physiology, Pathology, and Terminology was renamed as Image Production

▪ **Learning Outcomes have been rewritten as the following;**

1. The student will review factors affecting receptor exposure, contrast, spatial resolution and distortion.
2. The student will discuss the development and use of radiographic technique charts.

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3. The student will identify the purpose of automatic exposure control (AEC) and its advantages and disadvantages.
4. The student will define various digital imaging characteristics, including equipment-related spatial resolution, contrast resolution and image signal.
5. The student will review the methods and legal considerations for proper image identification.
6. The student will identify components of various types of radiographic image equipment, including the operating console, x-ray tube, AEC/manual exposure controls and beam restriction devices.
7. The student will list the basic components of the x-ray generator, transformers and rectification system.
8. The student will identify components of fixed and mobile fluoroscopic units, including types of image receptors, viewing systems, recording systems, automatic brightness control (ABC), magnification mode and table types.
9. The student will describe the components of digital imaging, including both CR and DR receptors.
10. The student will review image processing and display characteristics in terms of raw data (pre-processing data), corrected data, display data, post-processing, display monitors and imaging informatics (DICOM, PACS, RIS/HIS and EMR/EHR).
11. The student will identify criteria for image evaluation of technical factors, including exposure indicators, quantum mottle, saturation, contrast, spatial resolution, distortion, identification markers, image artifacts and radiation fog.
12. The student will discuss quality control of imaging equipment and accessories in terms of beam restriction, recognizing and reporting of malfunctions, digital imaging receptor system QC, and shielding accessories.

5) Competency #4: Equipment Operation and Quality Control was renamed as Procedures

▪ **Learning Outcomes has been rewritten as the following;**

1. The student will discuss positioning and technique variations for various radiographic procedures, including head, spine, pelvis, thorax, abdomen/GI, urologic, upper and lower extremity studies.
2. The student will label each anatomical structure with its accepted medical term when given diagrams of the skeletal, digestive, circulatory, respiratory, reproductive, urinary, and nervous/ sensory systems.

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3. The student will evaluate radiographic images of the skeletal, digestive, circulatory, respiratory, genitourinary, and nervous/sensory systems in terms of positioning accuracy, image quality, and anatomical structures and physiological functions visualized.
4. The student will evaluate radiographic images of the skeletal, digestive, circulatory, respiratory, genitourinary, and nervous/sensory systems in terms of pathologies revealed.
5. The student will explain the steps for patient preparation and patient positioning when given a list of routine and special radiographic procedures, including procedure adaptation for body habitus, trauma, pathology, age or limited mobility.
6. The student will select the equipment needed and the exposure settings that are consistent with A.R.R.T. specifications when given a list of routine and special radiographic procedures.

6) Competency #5: Radiation Protection and all Learning Outcomes were REMOVED.

7) Competency #6: Patient Care and Education and all Learning Outcomes were REMOVED.

After further discussion, the group expressed their concerns about the suggested changes within the clinical courses. Many of the instructors felt that the layout and alignment of standards to the lecture courses should be a task completed by the clinical coordinators. Sasha understood their concerns and suggested to them that a small curriculum task-force of 5 to 6 clinical coordinators will be the best option due to recent state budget cuts that directly impacted traveling across the state.

Sasha added that she would have to include faculty of colleges who offer UltraSound, Mammogram and other specialty Radiologic areas to work on updating those program standards as well during that same meeting if possible. She stated that smaller groups of faculty members from each region of the state tend to work better together. The group said that having a smaller group to tackle these changes is beneficial when getting the work done. Sasha said she would have to speak with the Executive Leadership before she can schedule a meeting.

Lastly, Sasha informed the group that the updated discussed in the meeting will be placed in KMS over the next few weeks and will send it out to the entire IFCC for review; once everything including the meeting minutes is completed. She asked the group if they had further questions and they asked about virtual IFCC. Sasha informed the group that due to recent state-wide budget cuts handed down to state-agencies from Governor Kemp, Commissioner Aruther has requested that the System Office cut back on travel and hold virtual meetings. Sasha further explained that this not only goes for IFCC meetings but peer group meetings and more. She



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stated that special considerations such as this meeting would have to gain permission by justifying the TCSG Executive Leadership for the need to a face-to-face meeting. The group understood. Sasha thanked everyone for coming and wished them safe travels.

Sasha adjourned the meeting at 3:36 pm