MEDICAL RADIOGRAPHY TECHNOLOGY PROGRAM

IMMERSION MANUAL FOR PRECEPTOR/CLINICAL INSTRUCTOR

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Introduction

The Medical Radiography Technology (MRT) Program Immersion Manual is a guide for preceptors/clinical instructors regarding Edenbrook College policies about clinical education, and general checklists and reminders. This manual should serve as a reference for preceptors/clinical instructors in resolving questions and problems concerning student performance.

The clinical evaluation system employed by the MRT Program is a variation of the Clinical Objective Evaluation concept for measuring the actual competency of students in performing medical imaging examinations. Students will be achieving different milestones at different periods of time. The following should be used as a guide in measuring student progress throughout immersion.

The idea is that students' progress from orientation to the clinical site to eventually become competent performing at the facility's workflow. Initially, students should concentrate on assisting their preceptor/clinical instructor as the focus is on helping students get used to the facility's workflow. Once the student can successfully navigate the department and comprehend work procedures, they can start to add imaging duties. Students and preceptors/clinical instructors should make every attempt to follow the immersion schedule.

The role of a preceptor/clinical instructor calls for a commitment to teaching and preparing students to be the best versions of themselves. This duty should be seen as an opportunity to influence how MRT students are taught and developed to become competent medical imaging technologists. We expect that our preceptors/clinical instructors will naturally be able to navigate and show what it takes to be outstanding.

We hope that this experience will be remembered as a rewarding and fruitful endeavour for everyone involved. Please note that both students and staff may contact the Edenbrook College MRT Faculty anytime with questions or concerns.

Immersion

Aim of Immersion

Immersion is an opportunity for students to observe, participate and practice skills at clinical practice. Immersion is designed to assist the student to gain practice and skills as identified by specific learning outcomes in their courses.

Although the student learns their skills in the classroom and labs, an immersion experience allows them to further develop and gain confidence with their skills. Immersion is also a valuable opportunity for the student to apply their skills and knowledge in a practical setting and increase their decision-making capacity under the supervision of a preceptor/clinical instructor.

Immersion Guidelines

General Guidelines for Immersion

1. The student is accountable for their own actions.
2. The student will abide by the rules and regulations of the agency's policies and perform within the guidelines of the immersion learning outcomes.
3. Each student will have an orientation to the clinical site arranged by the preceptor/clinical instructor and/or educational contact person. The preceptor/clinical instructor is responsible for orienting the student to the workplace.
4. Although one main preceptor/clinical instructor usually maintains responsibility for directing the student, specific job functions and duties may be delegated by the main preceptor/clinical instructor to one or more preceptors/clinical instructors (co-workers). More than one preceptor/clinical instructor may be involved in directing the student in a workplace where a number of staff perform the same job, where preceptors/clinical instructors have expertise in a particular area, or in a case where there is job sharing.
5. The student's clinical experience corresponds to the assigned practice site and the work schedule of the preceptor/clinical instructor. A student's assignment may increase in difficulty as they gain more experience and confidence.
6. The student will work the entire shift and complete the shift's assignment before leaving if applicable.
7. The skills which the student learns and performs in their immersion experience are not intended to replace the duties and responsibilities of the clinical site's regularly scheduled employees. The student's assignment must always come from within the assignment of the preceptor/clinical instructor (or their designate).
8. The student is expected to evaluate their own skill and competency level, including strengths and weaknesses, prior to and throughout immersion. This should be discussed with the preceptor/clinical instructor prior to and during the experience.

9. An initial evaluation and discussion between the preceptor/clinical instructor and student to plan the student's practical learning activities should occur before or at the start of immersion. Ongoing discussions during the immersion experience are encouraged to review progress and ensure the student is meeting the required intents/outcomes and practical skills.

Immersion Schedule

Cohort August 2024

Week	Day	Course	Learning Objectives
Week 7	Friday September 20	APPH 226 Apparatus and Image Management	Creating an exposure – anode and cathode Generator, kVp and mAs, Tube détente and centering to detector SID and OID
Week 8	Friday September 27	APPH 226 Apparatus and Image Management	Creating an exposure – anode and cathode Generator, kVp and mAs, Tube détente and centering to detector SID and OID
Week 9	Friday October 4	APPH 226 Apparatus and Image Management	Collimation and Scatter Contrast and Density Detail and Distortion (body part centered to detector, tube centered to detector and tube centered to body part) Technique Charts (selection on control panel)
Week 10	Friday October 11	APPH 226 Apparatus and Image Management	Grids, AEC PACS and post processing Artifacts Magnification Repeat and Reject Analysis
Week 11	Friday October 18	MRAD 223 Patient Care 1	**SIM lab for nursing, no immersion**
Week 12	Friday October 25	MRAD 223 Patient Care 1	Patient transfers: wheelchair and stretcher Slider board transfer, boost the patient up the bed, and log roll practice. Practice PPE sequence, donning and doffing, hand hygiene. Patient care in clinical environment – introduction to medical accessory equipment and contrast. Accessory equipment: collars, casts, traction, pulse oximetry, urinary catheters, oxygen administration and equipment, suctioning and cleaning agents. Documentation in Medical Imaging

Week 13	Friday November 1	MRAD 204 Radiographic Technique 1	Positioning and image critique for: hand, thumb, radius, ulna, wrist, scaphoid, forearm, elbow and humerus
Week 14	Friday November 8	MRAD 204 Radiographic Technique 1	Positioning and image critique for: elbow, humerus, shoulder girdle, clavicle, scapula and AC joints
Week 15	Friday November 15	MRAD 204 Radiographic Technique 1	Positioning and image critique for: pelvis, hip, femur and knee
Week 16	Friday November 22	MRAD 204 Radiographic Technique 1	Positioning and image critique for: femur, knee, tibia, fibula, patella, IC fossa, ankle, foot and calcaneus
Week 17	Friday November 29	MRAD 204 Radiographic Technique 1	Review of positioning and image critique for all body parts
Week 21	Friday January 10, **2025**	MRAD 256 Radiographic Technique 2	Positioning and image critique for: C Spine, T Spine, L Spine and pelvis
Week 22	Friday January 17	MRAD 256 Radiographic Technique 2	Positioning and image critique for: pelvis, ribs, sternum, chest and abdomen
Week 23	Friday January 24	MRAD 256 Radiographic Technique 2	Positioning and image critique for skull and facial bones
Week 24	Friday January 31	MRAD 256 Radiographic Technique 2	Positioning and image critique for orbits, nasal bones and sinuses
Week 25	Friday February 7	MRAD 256 Radiographic Technique 2	Review of positioning and image critique for all body parts
Week 26	Friday February 14	MRAD 202 Patient Care 2	**SIM lab for nursing, no immersion**
Week 27	Friday February 21	MRAD 202 Patient Care 2	Managing medical emergencies, codes, taking blood pressure, vitals, clean tech/dirty tech, isolation precautions, patient transfers, medical and surgical asepsis, donning and doffing PPE
Week 28	Friday February 28	MRAD 254 Fluoroscopic Imaging	Fluoroscopic medical imaging equipment: orientation to room, equipment and procedures: upper and lower digestive system. Participate in fluoroscopic cases.
Week 29	Friday March 7	MRAD 254 Fluoroscopic Imaging	Fluoroscopic medical imaging equipment: orientation to room, equipment and procedures: upper and lower digestive system. Participate in fluoroscopic cases.
Week 33	Friday April 4	MRAD 240 Specialized Imaging 1	Medical imaging equipment in the OR, C-arm, portables, patient management, sterile field, observe OR cases, patient transfers, donning and doffing PPE, medical and surgical asepsis
Week 34	Friday April 11	MRAD 240 Specialized Imaging 1	Medical imaging equipment in the OR, C-arm, portables, patient management, sterile field, observe OR cases, patient transfers, donning and doffing PPE, medical and surgical asepsis

Week 46	Friday July 4	MRAD 285 Radiographic Applied Skills	**Venipuncture lab, no immersion**
Week 47	Friday July 11	MRAD 285 Radiographic Applied Skills	Trauma and adaptive radiography, portables and C-arm

* **Day's off:**
New Year's Day
Family Day
Good Friday
Victoria Day
Canada Day
British Columbia Day
Labour Day
National Day for Truth and Reconciliation
Thanksgiving
Remembrance Day
Christmas Day
Boxing Day

Checklist for Preceptor/Clinical Instructor

	View Edenbrook College Preceptor/Clinical Instructor Training Video https://Edenbrookcollege.h5p.com/content/12916854044789507
	Orient Student to Department • Student to complete the Clinical Orientation Checklist and Safety Checklist forms within the first week of clinical
	Review Student Learning Objectives • Remind student to complete the Immersion Workbook and Immersion Reflective Journal • Prepare for positioning and image critique sessions with your student • Practice positioning the patient for procedures • Practice selecting the technical factors and explain the rationale for each selection on the control panel • Practice with the medical imaging equipment and accessory equipment • Review and practice with DR and CR (if CR is applicable at your site) • Practice patient transfers, wheelchair and stretcher • Practice patient care and communication with patients • Discuss case(s) and image(s) with your student • Practice image critique with your student, why is the image acceptable • Discuss and review workflow and expectation • Discuss immersion experience and invite questions

	• Review confidentiality and importance of maintaining information private • Demonstrate radiation safety practices • Model professionalism with your student • Ask and answer questions

Orientation of the Student to the Setting

An orientation to the clinical environment is mandatory to ensure safe integration into the environment.

This orientation must include:

1. Safety
    a. Emergency procedures
    b. Emergency equipment
    c. PPE supply and location
    d. Transfer equipment
    e. Radiation safety
2. Clinical agency
    a. Tour of agency
    b. Parking
    c. Security
    d. Changerooms
    e. Food services
    f. Washrooms
3. Department
    a. Location of rooms
    b. Location of equipment
    c. Computer equipment
    d. Communication
    e. Workflow

Assignments for the initial period may consist of basic introduction and a light workload.These types of initial assignments help ensure success for the student and allow manageable supervision time for the preceptor/clinical instructor.

It is suggested that preceptor(s)/clinical instructor(s) set aside time later in the day during the first few immersion opportunities to discuss the student's progress. Over the course of immersion, the student should be encouraged to gradually increase their responsibilities and be exposed to situations where they can practice and learn skills, to include decision-making and problem-solving.

Roles and Responsibilities

Role of the Program Clinical Coordinator (CC)

The program clinical coordinator is an Edenbrook College employee who is responsible for the overall management of clinical education. The clinical coordinator is aware and provides measures for student's physical and psychological safety.

Role of the Preceptor/Clinical Instructor

All employees at each clinical site are encouraged to collaborate with the student. However, a Primary Preceptor/Clinical Instructor must be established between Edenbrook College and the site. The primary role of preceptor/clinical instructor includes:

- Administrate and coordinate clinical education
- Act as a liaison between Edenbrook College and the clinical agency
- Coordinate clinical orientation
- Provide a schedule to meet clinical objectives with adequate supervision
- Actively support the student in obtaining clinical requirements
- Maintain confidential records with respect to the student's personal information and performance
- Be aware and provide measures for student's physical and psychological safety
- Establishing and maintaining a positive learning atmosphere
- Teaching by example or experience to enable students to think for themselves
- Providing guidance
- Providing ongoing feedback to the student in relation to the student's work, behavior, interactions, skills, and abilities so the student can evaluate and strive to improve their performance.
- Providing regular feedback to the College about a student's performance and promptly notifying program faculty if problems arise.
- Helping students succeed.
- Sharing knowledge and keeping up to date with best practices
- Being responsible to the student.
- Acting in a professional manner.
- Encouraging teamwork.
- Review and practice skills.
- Review and discuss case(s).

NOTE:

AT NO TIME SHALL STUDENT RECORDS BE COPIED OR KEPT.

All student records must be returned to the College.

Teaching and Mentoring

There are four interrelated principal aspects to the teaching and mentoring role.

1. **Role Model** - The student observes, questions, analyzes and emulates the preceptor's/clinical instructor's approaches, skills, interactions and abilities.
2. **Support System** - The student's primary contact with other staff, the public and any clients is through the preceptor/clinical instructor. As new learning takes place and new questions arise, the preceptor/clinical instructor is available for discussion and feedback.
3. **Facilitator of Learning** - The preceptor/clinical instructor plans learning experiences which will enable the student to achieve agreed-upon objectives and gain professional autonomy. The preceptor/clinical instructor shares expertise and guides the student in locating and utilizing appropriate learning resources.
4. **Evaluator** - The preceptor/clinical instructor continually assesses the student's level of competency, provides suggestions for improvement, and acknowledges professional growth. The preceptor/clinical instructor also completes the Medical Radiography Technology program evaluation forms.

The preceptor/clinical instructor has the advice and guidance of the College in carrying out these teaching activities. Remember, participating as a preceptor/clinical instructor and mentor is meant to be a rewarding experience for you as well as for the student.

Suggestions for Teaching

Good communication skills are the most important qualification for the teaching role of the preceptor/clinical instructor. There are several aspects of communicating.

1. Keep the lines of communication open and clear. Simple, direct questions and statements prevent confusion and misunderstandings. For example, questions such as, "Have you used the data entry system lately?" or "Would you like to have a brief refresher?" elicit information in a straightforward manner.
2. Think out loud. The student's problem solving, decision-making and priority setting skills can all be enhanced when the preceptor/clinical instructor verbalizes the processes that are going on in their head. Without the verbalization, the student may observe the results of the decision-making process but not understand the process and the many factors considered when arriving at a particular decision.
3. Provide rationale for actions. This enables the student to understand an activity rather than merely memorize the steps involved.
4. Act as a role model when communicating with other team members and with clients or the public. This reinforces positive attitude and collaborative behavior to the student.

5. Provide honest, appropriate and timely feedback. Both positive and negative feedback should be specific and occur on the spot, whenever appropriate. For example, "You have completed ¾ of the data entry for this morning and have been very methodical, thorough and accurate. There is still ¼ of the data left to enter prior to lunch and before we can start to analyze the data this afternoon. Now that you have some experience, you will need to increase your speed in order to complete the input before lunch."
6. A quiet talk away from the office may be necessary if the student is feeling the pressure of working in the field. Sometimes the student's anxiety interferes with learning and the ability to work quickly and efficiently. The student may be unaware of the effects of their behavior on self and others. An honest, calm discussion away from the tension of the office can often clear the air and get the student on the track to success.

Reference: Yonge, G. D. (1985). *Andragogy and pedagogy: Two ways of accompaniment*. Adult Education Quarterly, 35, 160-167.

Role of the Program Faculty and Staff

The Lead Instructor and Program Chair are responsible for managing the immersion and providing support to the preceptor/clinical instructor and student during the experience.

The College will support the preceptor/clinical instructor and clinical site by

- Providing orientation about the immersion and the process either by phone or in person.
- Providing resources to strengthen the preceptors'/clinical instructors' ability to understand the requirements of being a preceptor/clinical instructor.
- Working with the preceptor/clinical instructor or contact person(s) including:
    - maintaining telephone and email contact with preceptor/clinical instructor
    - making on-site visits as required
- Reviewing the student's progress with the preceptor/clinical instructor and the student via scheduled meetings.
- Problem-solving by:
    - understanding the immersion manual and expectations
    - discussing student issues
    - completing forms
    - managing student workload

The College supports the student by

- Orientating the student to practical experience by:
    - reviewing the immersion manual and expectations
    - understanding student expectations and responsibilities
    - stating clear objectives
- Interacting with the student through telephone and personal contact as needed.
- Reviewing the student's progress.
- Ensuring objectives are consistent with the Program's learning outcomes.
- Discussing and resolving issues or problems.

Role of the Student

The student has completed all classroom learning. The student is responsible for their own learning. They are to actively participate in their learning experiences. They are expected to ensure all the practical intents/outcomes are met.

The student is expected to approach the immersion experience with the same professionalism they would a real job. They are to work their assigned shifts, arrive punctually and adhere to clinical site policies, schedules, and routines. They are to notify the preceptor/clinical instructor of absences according to instructions provided by the preceptor/clinical instructor. In the event of illness, the student in question must be prepared to provide a validated doctor's certificate on the request. The preceptor/clinical instructor and/or student will be advised by the College on how to handle absences. For example, the student may be assigned an additional shift to make up for the absence. If the student is absent for any reason, it is the student's responsibility to ensure both their preceptor/clinical instructor and the program is notified of their absence as soon as possible (preferably before the workday begins).

The student is expected to prepare for their immersion experience by researching and updating themselves on pertinent information and legislation. They should be prepared to explain the reasoning behind their actions and work choices.

The student is to consistently maintain client and placement site confidentiality. This includes signing a Confidentiality Form. A student may be requested to leave the area if client confidentiality has been jeopardized or breached. If an incident should occur, the student will be expected to notify the preceptor/clinical instructor of the incident as soon as possible, and complete the clinical site's Incident Report, if applicable.

The student is responsible for their MRT Immersion Workbook and Immersion Reflective Journal.

Enhancing the Immersion Experience

The Learning Process

Learning may be defined as an adaptive change in behavior because of experiences, interaction with the environment, and reinforced practice. Learning is characterized by acquisition of skills, habits, knowledge, and attitude. While all individuals are capable of learning, there are significant differences between individuals in their ability and capacity to learn, the rate at which they learn, and the complexity of skills and behaviors they can master. The ability to learn is influenced by the degree to which an individual can receive and assimilate new information, by the student's belief in their capabilities and by factors such as age, background, education, personality and learning styles.

An individual's natural learning style may primarily be visual, auditory, or kinesthetic. Visual students tend to learn by watching or reading; auditory students learn through listening and discussion; and kinesthetic students learn best by becoming physically involved in what they are learning, often by 'trying things out'. The preceptor/clinical instructor and student are encouraged to be aware of individual learning styles and to become flexible in their approaches to mentoring and learning.

Regardless of age, learning styles and other factors, the optimum learning experiences of a student depend highly on the mentor or preceptor/clinical instructor.

The following are suggestions to keep in mind when mentoring.

1. Make time for daily interaction and relationship-building. This can be done by
    - attending to the student and sharing your perception of their progress and areas of improvement
    - encouraging, motivating, and inspiring students to succeed
    - relating to the student's experience, both good and bad
    - separating disciplinary discussions from relationship-building discussions
    - providing feedback and recognition
    - providing a positive environment for learning
    - offering a variety of teaching formats
    - assisting the student in finding resources and answers
    - showing support, acceptance, and teamwork
2. Praise or rewards, to be most effective in learning, must come soon after the student has performed well. The task, behavior, or accomplishment should be clearly connected with the praise in the mind of the student. Rewards may include learning new skills, performing skills independently, and having increased responsibility and autonomy.
3. Frequent, specific, and relevant encouragement, feedback, and recognition increases proficiency and skill development. The student may be unrealistic about how long it takes to learn a skill. They may become discouraged and frustrated if they do not regularly see evidence of their progress and achievements. You can help the student by encouraging and supporting them daily and helping them clarify goals and discussing their progress.
4. New and interesting experiences can be a reward in themselves. Adults want to learn and expand their awareness of things that have meaning in their lives.
5. Most students appreciate honest feedback regarding their progress. Try to be constructive. Give suggestions and strategies to improve their performance.
6. Everyone can suffer from student overload, especially when circumstances are new and different. You need to keep in mind that the student may need to perform a specific skill many times before they have mastered it. Your patience can be extremely helpful to and appreciated by the student.
7. Think out loud. The student's problem-solving, decision-making, and priority-setting skills can all be enhanced when the preceptor/clinical instructor verbalizes the processes that are going on their head. Without the verbalization, the student may observe the result of the decision-making or problem-solving process but not understand the process and the many factors considered when arriving at a particular decision.
8. Focus on empathy and respect the rights and feelings of others. Allow the student to speak freely while encouraging respect. Acknowledge and allow individual differences.
9. Encourage self-expression and independent thinking. Allow and encourage discussion about rules and standards and allow for disagreement.
10. Be aware of different leadership and learning styles and be flexible in your approach towards

students. Recognize that some students learn by seeing the task or behavior performed or by a visual representation of the process, whereas others learn better by hearing an oral explanation. There are others who learn best by doing a task themselves. An authoritative leadership style also aids learning.

11. Provide rationale for actions. This enables the student to understand an activity rather than merely memorize the steps involved.
12. Teach by example. Model expected behavior with confidence and a positive attitude. Remember you are a role model when communicating with other team members, with clients, and with the public. Modeling effective behavior and communication styles encourages positive attitudes, enhances communication and collaborative behaviors of the student, and builds relationships.
13. Share information and use experiences (both yours and theirs) as you relate theory into practice and real-life situations.
14. Provide honest, appropriate, and timely feedback to the student. Encourage the student to be open in their self-assessments as this allows development of the best plan to learn the necessary skills. Feedback should be specific and occur on the spot, whenever appropriate.

Assisting the Student to Be Successful

There could be a number of problems that students are facing, and they are finding it difficult to focus on their immersion. These could be personal, emotional, family issues, illness, addiction, and so on. The preceptor/clinical instructor should talk with the student involved and find out if there is something that can be done to help with the situation. Sometimes problems are minor and once pointed out to students they will correct their behavior and the problem may be resolved.

There are services available at the College to help students if they require assistance. Contact the course instructor immediately if you are concerned and require more information to assist the student.

There could also be students who display unprofessional, unethical, or unsafe behaviours that may lead to emotional or physical harm to patients. These problems may be more difficult to resolve, and strategies must be put in place to ensure patient safety.

These guidelines were developed to assist you and the student when you think the student is not doing well. Your goal should be to develop strategies to promote the student's achievement and maximum potential. Below are some general guidelines that you will likely find helpful as you work with the student.

You are not alone – You should not try to carry out this process alone. Contact the assigned course instructor early in the process. Keep them apprised of the situation. They can offer suggestions and support.

1. The student is a part of the process. Provide oral feedback early, seek clarification and information, and get the student's perspective. Feedback at any point in the process can be oral or written. If you decide not to provide written feedback, you need to write an objective summary of your discussion in your own notes (include the dates and times). Sometimes you

think you have been clear when talking to the student and the student ends up hearing something totally different. Written feedback can help you clarify your own thoughts and provide clarity for the student. If the problem continues it will prove beneficial to have written feedback for yourself and the student.

2. Make the process as clear and transparent as possible. Be clear about: What the problem is, Why it is a problem, The consequences of the problem, How can the problem be dealt with, How the student will know the problem is resolved, How the student can avoid the same problem in the future.

3. Student success should be the goal. When you and the instructor meet with the student be sure to stress that the goal is to help the student be successful in the course. Be clear about the specific clinical objectives that are not being met. Help identify strategies and work with the student to formulate a "plan" to deal with the problematic behaviour. The instructor will help with this step.

4. Timing is important. There are no hard and fast rules around when you do what, but there are some basic principles you can follow: Intervene as soon as possible. The earlier you start to address a behavior/problem the better. You may not yet be entirely clear what the problem is. Speaking to the instructor and the student will help clarify the problem and what needs to be done. You want to give the student the time and opportunity to correct problematic behaviors. It is never too late. If you do not observe the behaviours until later in the clinical immersion (i.e., after midpoint), it is better to help the student identify a problem or issue than to ignore the problem.

5. If the student displays unprofessional, unethical or unsafe behaviours that may lead to emotional or physical harm to patients, or damages the reputation of the college or facility, the student can be required to leave the clinical setting.

SUPERVISION

The preceptor/clinical instructor must be available at all times to approve, modify, intervene, or be consulted with or for the procedure, as required.

The preceptor/clinical instructor must also check and approve the images prior to the dismissal of the patient. The preceptor/clinical instructor is ultimately responsible for the procedure and for all phases of the student's involvement with the exam.

Direct supervision means the preceptor/clinical instructor is in the immediate location where the imaging procedure is occurring. Areas that require direct supervision throughout immersion include the OR and trauma.

Indirect supervision means the preceptor/clinical instructor may not be in the immediate location where the medical imaging procedure is occurring but is readily available and accessible at any time to the student.

PRIVACY AND CONFIDENTIALITY

All patient information will be treated as confidential by students. Edenbrook College has informed all MRT students that confidentiality must be maintained at all times. Confidentiality applies to everything hospital personnel and students in the exercise of their duties and refers to both important and seemingly unimportant information. This includes, but is not limited to, the nature of the patient's illness and its cause, the treatment the patient is receiving, and everything the patient discloses with a view to giving a better understanding of their health condition.

Confidentiality also extends to everything learned during the course of the patient examination, e.g., patient reactions and all aspects of their condition.

Failure to comply will result in disciplinary action up to and including termination of participation in the Medical Radiography Technology Program.

All students are required to sign the Edenbrook College MRT Program "Pledge of Confidentiality" at the beginning of the program as a program requirement. In addition, students are required to complete a "Confidentiality" requirement in SPECO, Student Practice Education Core Orientation, for each health agency they attend in immersion. These health agencies are Vancouver Coastal Heath, Fraser Health, Providence Health Care and Provincial Health Services Authority. This confidentiality requirement document will confirm that the student has read this policy and fully understands the expectations and consequences of non-compliance of this policy.

PROGRAM POLICIES

Personal Appearance

The MRT program's appearance policy is based on expectations of a reasonable patient and in accordance with CAMRT Best Practice Guidelines. Students must adhere to this policy. Students are required to demonstrate a neat and professional appearance at all times.

Students are required to wear an Edenbrook College approved uniform, scrub top and bottom, and slip-resistant, closed-toe, closed-heel water impervious shoes. A long-sleeved shirt may be worn under the scrub top if it is cold.

Long hair should be tied back and loose clothing and dangly jewelry should not be worn. Clinical

practice is a scent free environment, therefore proper hygiene practices are required and no strong scents such as deodorants, perfumes or colognes are to be worn.

All healthcare students are required to wear name badges when at immersion

- Uniforms should be clean, fit properly, be in good condition and wrinkle-free.
- Good personal hygiene should be maintained at all times as to ensure infection control and safety practices are upheld.
    - Clean hair
    - Hair safely secured
    - Groomed facial hair
    - No artificial nails
- Students are to refrain from using colognes, perfumes, or scented toiletries. This is inresponse to a 'no scent' policy in healthcare environments.
- Jewelry should provide no risk to the wearer or patients.

Student Dress Code

The dress code, resulting in a unified professional look for clinical, is as follows:

- Edenbrook College uniform: ○ Scrub pants ○ Scrub tops
- Plain white warm up jacket/lab coat is permitted (not required)
- Plain long sleeve shirt under scrub top is permitted (not required)
- Slip-resistant, closed toe, closed-heel water impervious shoes
- Shoes must be kept clean.
- Name tag/student identification
- Dosimeter – provided for the student by Edenbrook College
- Right and Left lead x-ray markers

CODE OF CONDUCT

Code of Professional Conduct

As healthcare professionals, student's actions are guided by the codes of conduct set out by the provincial andemployer-based standards. The profession recognizes its obligation to identify and promote professional standards of conduct and performance. The execution of such standards is the personal responsibility of each member. Edenbrook College's MRT program is built on these standards and ethics.

MRT Student Code of Conduct

Students are responsible for adhering to all rules, regulations, and policies at the College. The College expects mature and professional behaviour on the part of its students both in school and while

attending College-related activities off campus. Students should demonstrate the same behaviour at school as they would in the workplace.

Student Responsibilities

The following list outlines Student's responsibilities as a student:

- Get and keep informed about course and program requirements and the availability of staff.
- Get informed about procedures respecting class rescheduling or replacement.
- Maintain satisfactory achievement in the course/program.
- Maintain communication with instructional staff.
- Conduct themselves in a manner that reflects a positive image of Edenbrook College when representing Edenbrook College in official and co-curricular activities.
- Observe all health and safety procedures outlined for classrooms.
- Follow all procedures that are in place during the pandemic. Program specific procedures will be provided as well.
- The use of audio devices for lecture recording is at the discretion of the instructor and should be agreed upon with him/her prior to class start.
- Video recording devices are not permitted in the classroom unless they are part of an activity organized and supervised by the instructor.
- All other forms of electronic, should be maintained in the off position unless they are part of an approved student accommodation.

Student Behaviour

It is the student's responsibility to ensure that they are familiar with Edenbrook College's academic policies/regulations including, but not limited to, grades and progression, attendance, grade appeals, drop/add/withdrawals, deficiency clearance, student conduct, and marking system. Students are also responsible for the maintenance of their academic records and assurance that all graduation requirements of the program have been satisfied.

Accountability

Students are directly responsible to the Edenbrook College faculty, clinical coordinators, and Clinical Instructors/preceptors.

Patient Confidentiality

Students must keep confidential any information regarding patients and must complete the Confidentiality Agreement form as per your clinical host's standards.

Attire/Dress Code

Students are required to demonstrate a neat and professional appearance at all times. They are required to wear an approved uniform, scrub top and bottom, and slip-resistant, closed-toe, closed-heel water impervious shoes during lab sessions at Edenbrook College. A long-sleeved shirt may be worn under the scrub top if it is cold. Long hair should be tied back and loose clothing and dangly jewelry should not be worn. Labs are scent free environments, therefore proper hygiene practices are required and no strong scents such as deodorants, perfumes or colognes are to be worn. Required attire during clinical placement will be discussed at each clinical site and the shoes described above are a requirement at all BC sites. All healthcare students are required to wear name badges when on-site either at school or at a clinical placement.

Acceptable Behaviour

Students are expected to perform in an ethical, responsible, professional, and clinically competent manner. They are expected to utilize all opportunities to improve Their knowledge and skills and attitude; and while in the clinical phase, to contribute to the department and clinical site in such a way as to provide the highest quality of patient care.

Student Sexual Abuse Policy

As a student enrolled in the Medical Radiography Technology Program, it's vital to understand and adhere to the policy regarding sexual abuse. This policy addresses the appropriate conduct expected from the MRT student during their educational tenure.

What Constitutes Sexual Abuse?

Providing a safe environment for patients and intervening in circumstances of abuse is stated in the Member Code of Ethics and Professional Conduct, of the Canadian Association of Medical Radiation Technologists (CAMRT).

Sexual abuse includes any behavior or action of a sexual nature without a person’s consent, and that goes beyond professional boundaries. This involves, but is not limited to:

- Physical sexual relations with patients.
- Touching a patient in a sexual manner, such as unnecessary contact with intimate body parts during procedures.
- Displaying behavior that suggests a sexual interest in a patient, even through non-physical gestures.
- Making remarks or comments of a sexual nature towards a patient.

Our Zero Tolerance Policy

The Medical Radiography Technology Program has a strict zero-tolerance policy for any form of sexual abuse or misconduct towards students and patients. We emphasize:

- Sexual abuse in any form is never acceptable and will not be tolerated.
- All reported allegations of sexual abuse will be thoroughly investigated by the program.
- Recognizing the impact of sexual abuse on students, patients, and their families, acknowledging diverse perspectives on what constitutes abuse, and respecting patient comfort levels.
- Students should promptly adjust their behavior or language if a student or patient expresses discomfort.

Guiding Principles for Student

During interactions with students and patients, the student is expected to:

- Obtain consent before any procedure involving physical contact.
- Respect personal space and a patient's right to withdraw consent at any time.
- Greet patients and their companions warmly and professionally, introducing themselves and clearly explaining procedures.
- Maintain a respectful, caring attitude, considering individual needs, cultural backgrounds, and autonomy.
- Avoid assumptions or judgments, ensuring non-verbal cues and language remain neutral and respectful.
- Communicate clearly and maintain confidentiality regarding patient information.

Reporting Incidents: Any student who experiences or witnesses' behaviour that may constitute sexual abuse as outlined in this policy is encouraged and expected to report the incident promptly. Reports shall be directed to instructors, the program chair, or the campus director. Confidentiality will be maintained, and measures will be in place to safeguard individuals from any form of retaliation when reporting these incidents.

Investigation Process: Upon receiving a report, Edenbrook College will initiate a thorough and impartial investigation into the alleged incident. This investigation will adhere to established protocols and timelines, involving appropriate authorities, and ensuring the involvement of all relevant parties.

Confidentiality and Support: Confidentiality will be maintained throughout the investigation process to the extent possible, respecting the privacy of all involved parties. Students involved in the investigation will be provided with necessary support resources and assistance.

Resolution and Follow-up: Following the investigation, appropriate actions will be taken based on the findings. This may include disciplinary measures if the reported behaviour is found to violate the Sexual Abuse Policy. Edenbrook College will communicate the resolution to the involved parties and take steps to prevent recurrence.

Non-Retaliation: Edenbrook College ensures that there will be no negative repercussions for individuals reporting incidents of sexual abuse. Protection against retaliation is a fundamental aspect of the reporting and investigation procedures.

Support Resources:

https://www.camrt.ca/mrt-profession/professional-resources/code-of-ethics/

https://www.traumainformedcare.chcs.org/what-is-trauma-informed-care/

Edenbrook-Sexual-Violence-Policy-2022-1.pdf (Edenbrookcollege.com)

https://www.wsps.ca/search-results#q=Workplace%20Violence%20%26%20Harassment%20Awareness&t=Shop&sort=relevancy

Conclusion

This policy serves as a guideline to ensure a safe and respectful learning environment for both students and patients. Any violation of these standards will be treated seriously, leading to necessary disciplinary measures, potentially including dismissal from the program.

Preceptor/Clinical Instructor Survey

As part of the program's quality improvement plan, we will request that you complete the anonymous preceptor/clinical instructor survey. Your feedback is valuable to the College and helps us improve our program. The survey may be sent to preceptors via email with a hyperlink.

Time Sheets

Faculty will complete the attendance timesheet in Edenbrook for their course.

Protocol Policy

Students are to follow the protocols of the clinical site for each examination. Edenbrook College has stressed flexibility and adaptability as strengths that are required by medical imaging technologists and feel that students should quickly adapt to a different protocol from what we have learned at school. We ask however, that each clinical site has the student follow their site-specific protocols for consistency. If technologists at your facility have the flexibility to complete their protocol, please have the technologist decide on which protocol the student will follow.

Safety at Clinical/Host Site

We are committed to providing a safe and healthy immersion experience for our students. To achieve this, we ask that preceptors/clinical instructors and individuals who work with our students ensure

compliance with occupational health and safety legislation, by:

- Providing and maintaining equipment and systems which are safe and without risks to health. In addition, ensuring that students have access to the appropriate personal protective equipment when applicable.
- Providing the information, instruction, and supervision necessary and appropriate to ensure the health and safety of all students while at the host site.
- Ensuring that in the event a question or debate arises in relation to productivity or safety, safety will receive priority.
- Taking responsibility and accountability for ensuring every reasonable precaution is exercised to ensure the safety of each student under their direction.
- By completing the safety training within the first two sessions of the student being at the immersion site.

Accident Reporting

The student is expected to report any clinical incidents they are involved in during their immersion and any incidents which result in their own personal injury.

- In every instance where there is an incident or injury or if the student has come in contact with a communicable disease, no matter how minor it may seem, the incident must be reported, investigated and documented.
- The student must report the incident to the preceptor/clinical instructor and/or clinical supervisor, and proper forms must be completed and signed in accordance with the clinical site's procedures.
- The preceptor/clinical instructor will complete an incident report for the college.
- A copy of the report will be placed in the student's clinical file.
- Students are responsible to know, understand and agree to abide by the clinical site's infection control policies and procedures of their clinical education setting.
- In addition, the student must report the incident to the Program Chair within 24 hours of the incident.

Clinical Injuries

Students involved in an injury during immersion should immediately seek support from their preceptor/clinical instructor. The preceptor/clinical instructor should provide first aid or call 911 depending on how serious the incident may be. The preceptor/clinical instructor should follow the institution's procedures and policies for incident reporting. The college should be notified immediately.

The college will work with the preceptor/clinical instructor to determine next steps and will complete the necessary documentation. The college representative will follow up with both the host site and student.

Conflict Resolution/Sexual Violence & Harassment/ Bullying/ Discrimination

Edenbrook College is committed to the appropriate, respectful, and informal resolution of all conflicts where possible; and to promoting an environment, free from discrimination and harassment, including sexual harassment based on the protective characteristics set out in the British Columbia Human Rights Act. Such discrimination and harassment undermine the mission of Edenbrook College by discouraging individuals from fully participating in academic and professional work. Not only do discrimination and harassment negate the principles of college life, but they are also against the law and will not be condoned at Edenbrook College. It is the responsibility of all members of the College community to contribute to a respectful environment for work and study.

The student will contact the college if they feel they have been treated inappropriately.

The preceptor/clinical instructor is to contact the college immediately if they feel the student is acting inappropriately with staff or patients.

SAFETY

Dosimetry

Exposure to radiation for Medical Radiography Technology (MRT) students participating in immersion must be monitored to ensure that no one receives an exposure that could have a potentially adverse effect. Health Canada's National Dosimetry Services (NDS) provides equipment, monitors and records radiation exposure. According to Safety Code 35, all radiation workers (including students) must monitor radiation exposure with personal dosimeters. All personal dosimeters must be worn and stored by the recommendations of the dosimetry service provider. All personal dosimeter records must be maintained for the lifetime of the facility.

It is the responsibility of the Edenbrook College to acquire the dosimeter for each student and maintain the services necessary. Any personal information required to obtain the dosimeter must be obtained by the Edenbrook College directly from the student.

Pregnancy

According to Safety Code 35, a pregnant radiation worker (including the MRT student) should immediately notify the employer (Edenbrook College and clinical agency) upon the knowledge of pregnancy in order that appropriate steps may be taken to ensure that work duties during theremainder of the pregnancy are compatible with the recommended dose limits.

Safety Code 35 Appendix 1

N.B. Accommodations can be made to adjust for the individual needs of the pregnant student. These accommodations may lead to a delay in graduation from the program if the student is unable to successfully achieve all program requirements.

N95

The use of fitted N95 masks may be used in the clinical setting. All students are mask-fit tested to a personal fit. It is the responsibility of the student to disclose personal N95 size to the clinical agency. It is the responsibility of the clinical agency to make appropriate masks available to each student.

Appendix I

- Statement of Confidentiality
- Orientation Checklist
- Safety Checklist
- Self Evaluation
- Clinical Instructor – Student Evaluation
- Preceptor/Clinical Instructor Evaluation
- Immersion Workbook
- Immersion Reflective Journal
- Accident Incident Investigation Form
- Witness Statement Form

CONFIDENTIALITY STATEMENT

In accordance with regulations regarding confidentiality of information or knowledge concerning the patient, students in Edenbrook College of Health, Business and Technology shall adhere to the following policy:

1. All aspects of the patient's medically related information and/or data shall not be discussed with any person or persons under any circumstances, except in a structured, teaching-learning situation.
2. Under no circumstances is the student to photocopy and/or tape record any part of the patient's medical record/chart or requisition.
3. Failure to honour this basic ethical right of the patient may result in the immediate dismissal of the student from the program.

I understand that all information about the patient's condition is confidential. I hereby acknowledge that I will not discuss such confidential information in ANY public area inside or outside of the educational arena.

_____ _____

Name of Student (PRINTED) Date

_____

Name of Student (SIGNATURE)

_____ _____

Signature of Program Personnel Date

MRT STUDENT CONFIDENTIALITY STUDENT PLEDGES

STUDENT PLEDGES

Pledge to Confidentiality

As an employee, member of the medical staff, volunteer,other worker, placement student or co-op student associated with the host site, I will have access to information and materials relating to patients, employees, other individuals, which is of a private and confidential nature.

- At all times, I shall respect the privacy anddignity of patients, employees, and all associated individuals.
- I shall treat all administrative, financial, patient, employee and other records as confidential material, and I will protect them toensure full confidentiality. I shall not read records or discuss, divulge or disclose such information unless there is a legitimate purpose as it relates to my employment.
- I shall ensure that confidential information is not inappropriately accessed, used or releasedeither directly by me, or by virtue of my signature or security access to premises or systems.
- I shall only access, process and transmit confidential information using the Host site hardware, software and other authorized equipment, as required by the duties of my position

Pledge to the Code of Conduct

As a member of the health care community, patient,client, employee, physician, dentist, visitor, guest, volunteer, student and contractor, I share in the vision of the host site l and will strive to create a culture of respect and co-operation by:

- Treat others with respect, dignity, caring and compassion.
- Demonstrate courtesy, honesty and integrity
- Respect the rights of others regardless of theirrace, ancestry, place of origin, citizenship, religion, gender, sexual orientation, age or disability
- Provide an environment that ensures and protects the right to personal dignity and privacyfor every individual
- Ensure the physical safety of each individual
- Refrain from the use of offensive and abusive language
- Maintain confidentiality and honour the privacyof health information in all respects including not seeking information of others
- Act in a professional manner that promotes teamwork, communication and accountability
- Display accountability for one's actions and decisions
- Comply with all applicable federal, provincial andmunicipal laws

I understand and agree to abide by the principles outlined in this document. I also understandthat should any of these principles be breached, I will be subject to disciplinary action up to and including termination, loss of privileges or similar action appropriate to my position with the Host Site.

Date: _____

Student Name: _____ **Student Signature:** _____
(Print) (Signature)

MRT PROGRAM STUDENT ORIENTATION CHECKLIST

Student Name: _____

Clinical Site: _____

This is a mandatory checklist for all students participating in the Medical Radiography Technology program immersion. This checklist is to be completed within the first week of the immersion.

Meet Staff Medical Imaging Technologists	
Meet Staff Radiologist(s)	
Locate Supplies (patient gowns, linen, cleaning supplies)	
Locate Reception/Waiting Area/Medical Imaging Rooms/Workstations/Reporting	
PACS/RIS (Logins, navigation, procedures)	
Requisitions/Clinical Forms	
Medical Imaging and Reporting Protocols	
Department Manuals (MSDS, Safety, Protocols, etc.)	
Site Policies and Procedures	

Preceptor/Clinical Instructor: _____Signature: _____

Date: _____

Student: _____ Signature: _____

Date: _____

MRT PROGRAM STUDENT SAFETY CHECKLIST

Student Name: _____

Clinical Site: _____

This is a mandatory checklist for all students participating in the Medical Radiography Technology program immersion. This checklist is to be completedwithin the first two sessions of immersion.

1. Fire Safety
   - ☐ Fire extinguishers
   - ☐ Fire exits
   - ☐ Fire blankets (where applicable)
   - ☐ Pull stations

2. First Aid Equipment
   - ☐ Eyewash station
   - ☐ First aid kit
   - ☐ Emergency shower (where applicable)

3. Emergency Code
   - ☐ Code colors (where applicable)
   - ☐ Procedures for codes (where applicable)
   - ☐ Emergency telephone/telephone list

4. Needle stick
   - ☐ Sharps disposable containers
   - ☐ Sharps injury logbook

5. Aseptic Techniques
   - ☐ Sterile gloving
   - ☐ Proper removal of dirty gloves, masks and gowns
   - ☐ Hand wash stations
   - ☐ Proper waste disposal

6. Incident Reporting
   - ☐ Incident report form
   - ☐ Accident/Injury report form

7. Other
   Specify:

Preceptor/Clinical Instructor Signature: _____Date: _____

Student Signature:_____ Date:_____

MRT PROGRAM STUDENT SELF EVALUATION

Student Name: _____

Clinical Site: _____

Date: _____

INSTRUCTIONS: As students you are constantly evaluated by your preceptors/clinical instructors in order to monitor your progress during clinical education. However, it is important that your instructors also are made aware of how you perceive your experiences and ability. This evaluation asks you to candidly discuss your current progress. Please check the appropriate column or columns which best describe your assessment about your level of proficiency at this point in your training.

	Excellent	Good	Average	Needs Improvement
Professional Conduct Mannerisms, cleanliness, neatness				
Attitude Enthusiasm for profession interest in Assigned activities				
Communication Skills Interpersonal skills (patients/staff)				
Patient Care Skills Awareness of emotions, modesty				
Cooperation Willingness to assume duties				
Dependability Punctuality & reliability				
Self-control Confidence in personal ability				
Application of Knowledge Use of academic information				
Organization of Duties Logistical & efficient performance				
Adaptability Achievement of routine exams on non-routine patients				
Attendance Punctual and notifies clinical site when not in attendance				

MRT PROGRAM CLINICAL INSTRUCTOR - STUDENT EVALUATION

Student Name: _____

Clinical Site: _____

Date: _____

INSTRUCTIONS: The purpose of this evaluation is for the clinical instructor to provide feedback to the student. Please be objective when considering your responses to these questions. Please read each statement and rate your response.

	Excellent	**Good**	**Average**	**Needs Improvement**
Professional Conduct Mannerisms, cleanliness, neatness				
Attitude Enthusiasm for profession interest in Assigned activities				
Communication Skills Interpersonal skills (patients/staff)				
Patient Care Skills Awareness of emotions, modesty				
Cooperation Willingness to assume duties				
Dependability Punctuality & reliability				
Self-control Confidence in personal ability				
Application of Knowledge Use of academic information				
Organization of Duties Logistical & efficient performance				
Adaptability Achievement of routine exams on non-routine patients				
Attendance Punctual and notifies clinical site when not in attendance				

MRT Program Preceptor/Clinical Instructor Evaluation

Clinical Site: _____

Preceptor/Clinical Instructor Name:

_____

Date: _____

INSTRUCTIONS: The purpose of this questionnaire is for the student to evaluate the preceptor/clinical instructor. Please be objective when considering your responses to these questions. Please read each statement and rate your response.

	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree
Is willing to provide clinical supervision and guidance as required by the preceptor/clinical instructor manual.					
Helps me apply classroom knowledge to the clinical situation.					
Discusses my performance with me.					
Corrects me in a constructive and professional manner when necessary.					
Appears interested in me and my learning experience.					
Is a professional role model for me.					
Helps me develop my problem-solving skills.					
Encourages me to perform at an appropriate level of confidence.					
Assists me in finding answers to my questions.					

Student Name: _____ Student Signature: _____

Date: _____

Immersion Workbook

Student Information

- Name: _____
- Date: _____

Instructions

- Please use this workbook to log information about the cases you observe and participate in during your immersion at your hospital.
- Fill in the details for each case, including clinical history, procedure details, and any noteworthy observations.

Case Details

Patient's Clinical History_____

_____

_____

_____

Procedure Details

- Procedure: _____
- Body Part: _____
- Positioning:_____
- Exposure Factors (kVp, mAs):_____

Your Role

- Your Role: Observer/Assisted/Unassisted
- Tasks Performed: _____
- Challenges Faced: _____

Observations

- Patient Safety and Comfort: Satisfactory/Needs Improvement
- Positioning: Satisfactory/Needs Improvement
- Image Quality: Satisfactory/Needs Improvement

- Any Artifacts Detected: Yes/No

Clinical Instructor/Preceptor Feedback

- Strengths: _____

  _____

  _____

- Areas for Improvement: _____

  _____

  _____

- Additional Notes: _____

  _____

  _____

Reflection and Learning

- **Highlight any significant learning experiences or challenges faced during your immersion.**
  - _____
  - _____
  - _____
  - _____
  - _____
  - _____
  - _____
  - _____

Immersion Reflective Journal

Date:

Today in one word:

How many stars would you rate today? (1-5)

Today's Highlights

1.

2.

3.

What knowledge, skills and/or attitudes did you learn today that you will use in the future?

What are your learning successes today?

What did you find challenging?

Is there anything you would do differently to support your learning tomorrow?

Accident Incident Investigation Form

Accident Incident Investigation Form

ACCIDENT INCIDENT INVESTIGATION FORM				
LAST NAME:	FIRST NAME:		PROGRAM:	
STUDENT:	EMPLOYEE:		VISITOR:	
ADDRESS:				
CITY:	POSTAL CODE:			
DATE OF OCCURRENCE:	TIME OF OCCURRENCE:			
DATE REPORTED:	TIME REPORTED:			
LOCATION OF INCIDENT:				
NATURE of INCIDENT				
☐ Hazardous Situation	☐ Incident	☐ First Aid	☐ Health Care	☐ Critical Injury
☐ Near Miss	☐ Auto Accident	☐ Violence	☐ Harassment	☐ Fire and/or explosion
☐ Slip and Fall	☐ Electrical	☐ Mental Health First Aid		
Other please specify:				
Assessment of Scene Performed. Supporting documents such as sketch, drawings, diagrams, etc. may be attached to this form, if applicable.				
DESCRIBE DETAILS of WHAT HAPPENED and NATURE OF INJURY				
NATURE OF FIRST AID TREATMENT:				
TIME FIRST AID TREATMENT APPLIED:				
NAME OF PERSON APPLYING FIRST AID:				

ACCIDENT/INCIDENT CAUSES		
Check all of the applicable causes listed below:		
☐ Poor housekeeping ☐ Slip/trip hazards ☐ Lack of proper equipment ☐ Defective tools/equipment ☐ Poor lighting ☐ Inadequate ventilation ☐ Excessive noise	☐ Improper PPE ☐ Fire & explosion hazard ☐ Irate client/employee ☐ Poor weather ☐ Improper body position ☐ Rushing ☐ Improper Lifting	☐ Using defective tool ☐ Modifying equipment ☐ Failure to use PPE ☐ Using defective equipment ☐ Not following procedure ☐ Inappropriate conduct ☐ Other
What are the reasons for the existence of these practices and/or conditions?		

PREVENTION/CORRECTIVE ACTION		
Check all actions necessary to prevent the incident/recurrence:		
☐ Training/instruction ☐ Improved work procedures ☐ Inform management of procedures ☐ Perform job hazard analysis ☐ Improve engineering design	☐ Replace defective tools ☐ Request ergonomic assessment ☐ Request environmental assessment ☐ Review work standards ☐ Improve housekeeping	☐ Notify appropriate individuals ☐ Replace defective equipment ☐ Improve inspection process ☐ Correction of work area ☐ Other

PART OF BODY INJURED			
Please indicate right side or left side of body:			
☐ Head	☐ Upper Back	☐ Lower Arm	☐ Upper Leg
☐ Eye(s)	☐ Lower Back	☐ Wrist	☐ Knee
☐ Neck	☐ Upper Arm	☐ Hand/Fingers	☐ Lower Leg
☐ Shoulder	☐ Elbow	☐ Hip	☐ Ankle/Foot

TYPE OF ACCIDENT/INCIDENT		
Please indicate which statement best describes the accident/incident:		
☐ Repetitive Strain	☐ Slip/fall	☐ Exposure to substance
☐ Acute Strain	☐ Vehicle incident	☐ Other (explain below)
☐ Caught in/under/in between	☐ Violence	
☐ Struck by, contact with	☐ Harassment	
	☐ Cut/bruise	

WITNESS(ES)
NAME:
ADDRESS:
NAME:
ADDRESS:
NAME:
ADDRESS:
Please remember to attach witness statements using the Witness Statement Form.

Date of Injury/Incident	
Current Date:	
Corrective action taken:	
Recommendations:	
Date recommendation assigned:	
Responsibility assigned to:	
Details of what has been done:	
Who has implemented the recommendation?	
Date of implementation:	
INVESTIGATED BY	
MANAGER NAME:	DATE:
MANAGER SIGNATURE:	
REVIEWED BY	
CAMPUS DIRECTOR:	DATE:
CAMPUS DIRECTOR SIGNATURE:	

Copies to:
Health and Safety Coordinator Joint Health and Safety Committee Management

Witness Statement Form

WITNESS DETAILS		
FIRST NAME:	LAST NAME:	
ADDRESS:		
CITY:		POSTAL CODE:
TELEPHONE:	CELL PHONE:	
DATE OF OCCURRENCE:	STATEMENT DATE:	
LOCATION OF INCIDENT:		

NATURE OF ACCIDENT INCIDENT		
☐ Hazardous Situation	☐ Incident	☐ First Aid
☐ Near Miss	☐ Auto Accident	☐ Violence
☐ Slip and Fall	☐ Electrical	☐ Mental Health First Aid
☐ Health Care	☐ Critical Injury	☐ Fire and/or explosion
☐ Harassment	☐ Other (*please specify*)	

WITNESS ACCOUNT *Describe in your own words, your account of the accident incident.*	
If you need more room, use the back of this form. Supporting documents such a sketch, drawings, diagrams, etc., may be attached to this form, if applicable.	
WITNESS SIGNATURE	**DATE**

Appendix II

Entry level competencies from the CAMRT, https://www.camrt.ca/certification-4/current-competency-profiles/ for Radiological Technology.

New National Competency Profile:
chrome-extension://efaidnbmnnnibpcajpcglclefindmkaj/https://www.camrt.ca/wp-content/uploads/2020/03/RTR-Companion-2019_FINAL.pdf

MRT Competency Profile
chrome-extension://efaidnbmnnnibpcajpcglclefindmkaj/https://www.camrt.ca/wp-content/uploads/2021/10/National-Competency-Profile-2019.pdf