F. Continuing Program Evaluation

1. Periodic and systematic review of the program’s effectiveness must be documented.
2. One element of program evaluation shall be the initial employment of graduates of the program.

NOTE: Educational programs accredited by an organization recognized by the United States Department of Education are considered to have met these standards.

APPENDIX E TO PART 75—STANDARDS FOR ACCREDITATION OF EDUCATIONAL PROGRAMS FOR RADIATION THERAPY TECHNOLOGISTS

A. Sponsorship

1. Educational programs may be established in:
   (a) Community and junior colleges, senior colleges, and universities;
   (b) Hospitals, clinics, or autonomous radiation oncology centers meeting the criteria for major cancer management centers or meeting demonstrably equivalent standards;
   (c) Medical schools; and
   (d) Postsecondary vocational/technical schools and institutions.

2. The sponsoring institution and affiliates, if any, must be accredited by recognized agencies or meet equivalent standards. When more than one clinical education center is used, each must meet the standards of a major cancer management center.

3. When didactic preparation and supervised clinical education are not provided in the same institution, accreditation must be obtained by the sponsoring institution for the total program. This institution will be the one responsible for admission, curriculum, and academic credit. The accredited institution shall be responsible for coordinating the program and assuring that the activities assigned to the student in the clinical setting are educational. There shall be a uniform, written, affiliation agreement between the accredited institution and each clinical education center, clearly defining the responsibilities and obligations of each.

B. Curriculum

Educational programs of 24 months and 12 months or their equivalents may be developed. A 24-month program shall admit those candidates with a high school diploma (or equivalent) as outlined in D.1. The 12-month program shall be designed for those students admitted with backgrounds as outlined in D.2.

Instruction must follow a plan which documents:

1. A structured curriculum with clearly written course syllabi which describe competencies and learning objectives to be achieved. The curriculum shall include but not necessarily be limited to the following:
   (a) Orientation to radiation therapy technology;
   (b) Medical ethics and law;
   (c) Methods of patient care;
   (d) Medical terminology;
   (e) Human structure and function;
   (f) Oncologic pathology;
   (g) Radiation oncology;
   (h) Radiobiology;
   (i) Mathematics;
   (j) Radiation physics;
   (k) Radiation protection;
   (l) Radiation oncology technique;
   (m) Radiographic imaging; and
   (n) Clinical dosimetry.

The curriculum must include a plan for well-structured competency-based clinical education.

2. Assignment of appropriate instructional materials.

3. Classroom presentations, discussions, and demonstrations.

4. Supervised clinical education and laboratory practicum.

5. Evaluation of students to assess knowledge, problem-solving skills, and motor and clinical competencies.

6. Program graduates must demonstrate competencies including, but not limited to, the following:
   (a) Practice oral and written communications;
   (b) Maintain records of treatment administered;
   (c) Perform basic mathematical functions;
   (d) Demonstrate knowledge of human structure, function, and pathology;
   (e) Demonstrate knowledge of radiation physics in radiation interactions and radiation protection techniques;
   (f) Provide basic patient care and cardiopulmonary resuscitation;
   (g) Deliver a planned course of radiation therapy;
   (h) Verify physician’s prescribed course of radiation therapy and recognize errors in computation;
   (i) Demonstrate awareness of patterns of physical and emotional stress exhibited by patients;
   (j) Produces and utilize immobilization and beam directional devices;
   (k) Prepare commonly used brachytherapy sources;
   (l) Demonstrate knowledge of methods of calibration of equipment, and quality assurance;
   (m) Prepare isodose summations;
   (n) Detect malfunctioning equipment;
   (o) Apply rules and regulations for radiation safety, and detect defects which might pose a radiation hazard;
   (p) Understand the function of equipment and accessories;
(q) Demonstrate knowledge of methods of continuing patient evaluation (follow up);
(r) Apply wedge and compensating filters;
(s) Recognize patients' clinical progress, complications, and demonstrate knowledge of when to withhold treatment until consultation with the physician; and
(t) Interact with patients and families concerning the physical and psychological needs of patients.

C. Resources

1. Program Officials. The program must have a qualified program official or officials. Primary responsibilities shall include program development, organization, administration, evaluation, and revision. A program director is necessary; other program officials may be required.

(a) Program Director—(1) Responsibilities.

—The director of the educational program shall be responsible for the organization, administration, periodic review, continued development, and general effectiveness of the program. The program director's responsibilities in teaching, administration, and coordination of the educational program in radiation therapy technology shall not be adversely affected by educationally unrelated functions.

—In a college-sponsored program, or a hospital-sponsored multiple affiliate program, the program director shall be an employee of the sponsoring institution. A schedule of regular affiliate visits must be maintained.

(2) Qualifications.

—Must be a technologist qualified in radiation therapy technology and educational methodologies.
—Must be credentialed in radiation therapy technology or possess suitable equivalent qualifications.
—Must have at least two years' experience as an instructor in an accredited educational program.

(b) Clinical Supervisor. Each clinical education center shall appoint a clinical supervisor.

(1) Responsibilities. The clinical supervisor shall be responsible for the clinical education and evaluation of students assigned to that clinical education center.

(2) Qualifications. Must be a technologist, with suitable experience, qualified in radiation therapy technology and educational methodologies and must be credentialed in radiation therapy technology.

(c) Medical Director/Medical Advisor—

(1) Responsibilities. The medical director/medical advisor shall work in consultation with the program director in developing the goals and objectives of the program and implementing the standards for achievement.

(2) Qualifications. The medical director/medical advisor shall be a qualified radiation oncologist certified by the American Board of Radiology, or shall possess suitable equivalent qualifications.

2. Instructional Staff—(a) Responsibilities.

The instructional staff shall be responsible for submitting course outlines for each course assigned by the program director; evaluating students and reporting progress as required by the sponsoring institution; and cooperating with the program director in the periodic review and upgrading of course material.

(b) Qualifications. The instructors must be individually qualified, must be effective in teaching the subjects assigned, and must meet the standards required by the sponsoring institution.

(c) Instructor-to-Student Ratio. The instructor-to-student ratio shall be adequate to achieve the stated objectives of the curriculum.

(d) Professional Development. Programs shall have a policy that encourages continuing education in radiation therapy technology and assures ongoing instruction for the faculty in curriculum design and teaching strategies.

3. Financial Resources. Financial resources for continued operation of the educational program must be assured.

4. Physical Resources—(a) General. Adequate classrooms, laboratories, and other facilities shall be provided. All affiliated institutions shall provide space required for these facilities.

(b) Equipment and Supplies. Appropriate modern equipment and supplies in sufficient quantities shall be provided.

(c) Laboratory. Energized laboratories must meet Federal and/or State radiation and safety regulations.

(d) Reference Materials. An adequate supply of up-to-date books, periodicals, and other reference materials related to the curriculum and the profession shall be readily available to students.

(e) Records. Records shall be maintained as dictated by good educational practices.

5. Instructional Resources. Instructional aids such as clinical materials, reference materials, and demonstration and other multimedia materials must be provided.

D. Students

ADMISSION

1. Applicants must be high school graduates (or equivalent) with an educational background in basic science and mathematics.

2. For admission to a 12-month program, the candidate must satisfy one of the following requirements:

(a) Graduation from an accredited or equivalent program in radiography.

(b) Successful completion or challenge of courses in the following prerequisite content areas:
—Radiation physics;
—Human structure and function;
—Radiation protection;
—Medical ethics and law;
—Methods of patient care;
—Medical terminology; and
—Mathematics.

(c) Successful demonstration of the following competencies:
—Practice oral and written communications;
—Perform basic mathematical functions;
—Demonstrate knowledge of human structure and function;
—Demonstrate knowledge of radiation physics in radiation interactions and radiation protection techniques;
—Provide basic patient care and cardiopulmonary resuscitation;
—Demonstrate awareness of patterns of physical and emotional stress exhibited by patients;
—Apply rules and regulations for radiation safety, detect defects which might pose a radiation hazard, and maintain control, if a radiation accident occurs; and
—Interact with patients and families concerning patients physical and psychological needs.

E. Continuing Program Evaluation
1. A process for periodic and systematic review of the program’s effectiveness must be documented and reflected in policies.
2. Program evaluation shall include the employment performance of recent graduates.

NOTE: Educational programs accredited by an organization recognized by the United States Department of Education are considered to have met these standards.

APPENDIX F TO PART 75—STANDARDS FOR LICENSING RADIOGRAPHERS, NUCLEAR MEDICINE TECHNOLOGISTS, AND RADIATION THERAPY TECHNOLOGISTS

The following section describes basic elements to be incorporated in credentialing programs of States that choose to regulate personnel who perform radiologic procedures.

A. Licensure
1. Only eligible applicants who have passed the licensure examination shall be licensed as Radiographers, Nuclear Medicine Technologists, or Radiation Therapy Technologists.
2. Licenses shall be renewed at periodic intervals.

B. Eligibility
1. For regular eligibility to take the licensure examination, applicants shall have successfully completed an accredited program of formal education in radiography, nuclear medicine technology, or radiation therapy technology.
2. Special eligibility to take the licensure examination shall be provided for applicants whose training and/or experience are equal to, or in excess of, those of a graduate of an accredited educational program.

C. Examination
A criterion-referenced examination in radiography, nuclear medicine technology, or radiation therapy technology shall be utilized to test the knowledge and competencies of applicants.

D. Continuing Competency
The licensed Radiographer, Nuclear Medicine Technologist, or Radiation Therapy Technologist shall maintain continuing competency in the area in which he/she is practicing.

E. Policies and Procedures
An organization that seeks to be recognized for the certifying of personnel shall adopt definite policies to ensure validity, objectivity, and fairness in the certifying process. The National Commission for Health Certifying Agencies (NCHCA) has published suitable criteria for a certifying organization to adopt with respect to policies for: (1) Determination of appropriate examination content (but not the actual content for any specific occupation); (2) construction of examinations; (3) administration of examinations; and (4) fulfilling responsibilities to applicants. An organization (whether an NCHCA member or not) that adopts these or equivalent criteria will meet all of the requirements of this section of these standards.

APPENDIX G TO PART 75—STANDARDS FOR LICENSING DENTAL HYGIENISTS AND DENTAL ASSISTANTS IN DENTAL RADIOGRAPHY

The following section describes basic elements to be incorporated in credentialing programs of States that choose to regulate personnel who perform radiologic procedures.

Currently, Dental Hygienists are credentialed through individual State licensure processes, all of which include assessment of competence in dental radiography. In all States, Dental Hygienists are required to be licensed prior to practicing. The existing State dental hygiene licensure processes meet the intent and purpose of the Consumer-Patient Radiation Health and Safety Act of 1981 and the standards for licensing Dental Hygienists in dental radiography set forth below.