



Queen Margaret University  
EDINBURGH

# BSc (HONS) DIAGNOSTIC RADIOGRAPHY

## Clinical Practice in Diagnostic Imaging 2

### Staged Clinical Assessment

This section to be completed by the student.

Name -----

Matriculation No. -----

Hospital -----

Department -----

Examination -----

Date -----

Assessor -----

**CP2 Assessments, one from each category:**

- Extremity joint: elbow, wrist, knee or ankle
- Chest or Abdomen

**To be completed by the Assessor (Please tick):**

PASS

FAIL

Assessor's signature \_\_\_\_\_

Student's signature \_\_\_\_\_



**This document must remain intact to facilitate marking and collation.  
Clinical Assessor completes the remainder of this document by ticking the boxes.**

Examinations are to be performed according to local protocol.

Patient Consent Received by.....Supervisor Sign

Check of pregnancy status is appropriate. YES / NO (Please circle)

**1 THE REQUEST**

The student should not be prompted, the single appropriate question being 'which projections will you do?'

	Yes	No
a) * Has the student checked all request details are completed: patient ID, clinical information, signature of referrer, date?		
b)* Has the student followed the local IRMER rules for justification and authorisation of the request?		
c) Does the student demonstrate understanding of the medical terminology used?		
d) Has the student considered viewing previous images etc ?		
e) Does the student know which projections are appropriate?		
f) If the examination was a mobile one, did the student seek the permission of a nurse prior to the examination?		

**2 ADVANCE PREPARATION**

	Yes	No
a) Was the X-ray room presented in a tidy fashion?		
b) Did the student demonstrate awareness of infection control issues?		
c) Was the X-ray equipment, including image receptors where appropriate, set up in advance?		
d) Was a preliminary set of exposure factors set?		
e) Were protective devices and general accessories available?		

**3 PRELIMINARY PATIENT CARE AND MANAGEMENT**

	Yes	No
a) Did the student introduce himself or herself and greet the patient and / or carer appropriately?		
b) * Did the student obtain a positive identity?		
c) * Even where the information was completed on the request, did the student ask whether they had been X-rayed before?		
d) Did the student communicate well, giving clear instructions to the patient?		
e) Did the student prepare the patient appropriately, with regard to clothing, jewelry etc.?		
f) * Did the student check that the correct area is to be examined?		
g) * If appropriate, did the student check pregnancy status?		

**4 THE EXAMINATION – TECHNICAL**

For ALL projections did the student:

- a) position the patient and image receptor correctly?
- b) use the correct surface markings, centering point(s) and central ray direction(s)?
- c) protect the patient correctly through the use of collimators and accessory devices?
- d) select the correct anatomical marker and place it appropriately on the image receptor?
- e) correctly adjust and check pre-set exposure factors?
- f) instruct the patient clearly and concisely?
- g) use immobilisation and support devices appropriately to facilitate patient comfort and stability?
- h) observe the patient closely throughout the procedure?
- i) check that the exposure occurred?
- j) comply with the local rules governing safe use of ionising radiations?

Yes	No

**5 THE EXAMINATION – PATIENT CARE**

Did the student:

- a) adopt appropriate infection control measures and practices?
- b) communicate effectively with the patient throughout the examination?
- c) answer patient queries adequately?
- d) give consideration to the patients' physical condition and special requirements?
- e) attend to safety issues appropriately?
- f) upon completion of the examination, give appropriate and accurate information to the patient or their carer?
- g) ensure that the patient was fit to leave the department or was left in a comfortable condition on the ward?
- h) appear and act in a professional manner throughout?

Yes	No

**6 THE EXAMINATION – ADMINISTRATION**

Did the student:

- a) complete documentary and electronic administrative requirements as per local protocol?
- b) deal with the images and documentation correctly at the end of the examination? (e.g. send for reporting, to clinic etc.)

Yes	No

**7 THE EXAMINATION – DIAGNOSTIC QUALITY**

Were the images of diagnostic quality according to local protocol?

Projection 1

Projection 2

Projection 3

Yes	No

Please give reasons for repeat radiographs below.

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Copies of the assessment images are not required.

**8 STUDENT CRITIQUE OF THE RADIOGRAPH(S)**

Diagnostic quality is NOT an issue in this section. The student is required to critique the original radiographs (not repeats) under the tabulated headings. For all projections, please indicate whether or not this was achieved.

Did the student correctly appraise the radiographs with regard to -

	1		2		3	
	Y	N	Y	N	Y	N
identification?						
anatomical markers and legends?						
region of interest?						
projection?						
positioning?						
density, contrast, sharpness, exposure index?						
collimation?						
artifact?						
anatomy, anatomical variations, pathology?						
need for additional projections?						
need for repeats?						

**9 GENERAL INFORMATION**

Please delete inapplicable.

a) Was the student assisted with the examination? YES / NO

Specifically, what assistance was given?

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b) Did the student encounter any difficulties? YES / NO

Specifically, what were they and how did the student deal with them?

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c) Please make any other comments regarding student performance in this staged assessment that you feel are relevant.

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Signed-----(Clinical / Practice Assessor)

**THE STUDENT SHOULD COMPLETE THIS PAGE**

**1. Projection(s)** -----  
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**2. No. and size of image receptors** -----  
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**3. For each projection, list the exposure factors as tabulated:**

Projection	KVp	mAs	SID	IR	Grid?	Focus Size	S-Value/ Exp. Index

**4. Explain your reasons for choice of projections and other factors.**

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## STAGED CLINICAL ASSESSMENT

### MARKING SCHEME

The student must pass the practical element of the Clinical Assessment before proceeding to the element of discussion with the Academic Tutor.

### CRITICAL ELEMENTS

- 1 An automatic fail is the result of a **NO** response in any of the following sections: **1a, 1b, 3b, 3c, or 3f.**
- 2 An automatic fail is the result of a **NO** response in section **3g**( if appropriate).
- 3 Failure is the result of three **NO** responses in section **1e** and section **5b** and **h.**
- 4 Failure is the result of **NO** responses in **any 3** categories in section **4.**

The clinical assessor and the student must report the failure to the Module Coordinator as soon as possible.

As necessary, the student will be counselled and retrained prior to reassessment.





Queen Margaret University

## ASSESSMENT FEEDBACK FORM

Thank you for agreeing to take part in the student's assessment today.

It would be appreciated if you would consider filling in the form below. You do not need to complete the form; it is completed on a voluntary basis. Please note the feedback you provide is anonymous; your name will not be recorded on the form, by the student or the staff undertaking the assessment.

The feedback provided gives the student an insight into their standard of care and communication from a patient's perspective. The feedback is used to help the student plan their further development.

Thanking you in advance for your support and your contribution to improving the standard of healthcare in the future.

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Please circle as appropriate

- |  |     |    |
|--|-----|----|
| 1. Did the student introduce themselves?         | Yes | No |
| 2. Was the student polite and courteous?         | Yes | No |
| 3. Did the student explain the examination well? | Yes | No |
| 4. Did the student listen to you?                | Yes | No |
| 5. Did you feel cared for by the student?        | Yes | No |

Please add any additional comments, for example, is there anything the student could have done to improve your x-ray experience today?