



Radiation Therapy Examination

The purpose of *The American Registry of Radiologic Technologists® (ARRT®) Radiation Therapy Examination* is to assess the knowledge and cognitive skills underlying the intelligent performance of the tasks typically required of radiation therapists at entry into the profession. Using a nationwide survey, the ARRT periodically conducts a practice analysis to develop a task inventory which delineates or lists the job responsibilities typically required of radiation therapists.¹ An advisory committee then determines the knowledge and cognitive skills needed to perform the tasks on the task inventory and these are organized into the content categories within this document. The document is used to develop the examination. The results of the most recent practice analysis have been applied to this document. Every content category can be linked to one or more activities on the task inventory. The complete task inventory is available at arrt.org.

The following table presents the three major content categories covered on the examination, and indicates the number of test questions in each category. The remaining pages list the specific topics addressed within each category, with the approximate number of test questions allocated to each topic appearing in parentheses.

This document is not intended to serve as a curriculum guide. Although ARRT programs for certification and registration and educational programs may have related purposes, their functions are clearly different. Educational programs are generally broader in scope and address the subject matter that is included in these content specifications, but do not limit themselves to only this content.

Content Category	Number of Scored Questions²
Patient Care	47
Patient Interactions	
Patient and Medical Record Management	
Safety	49
Radiation Physics, Equipment, and Quality Assurance	
Radiation Protection ³	
Procedures	104
Treatment Sites and Tumors	
Treatment Volume Localization	
Prescription and Dose Calculation	
Treatments	
Total	200

¹ A special debt of gratitude is due to the hundreds of professionals participating in this project as committee members, survey respondents and reviewers.

² Each exam includes an additional 20 unscored (pilot) questions.

³ SI units are the primary (principal) units of radiation measurement used on the radiation therapy examination.



Patient Care (47)

1. Patient Interactions (25)

- A. Ethical and Legal Aspects
 - 1. patient's rights
 - a. informed consent (*e.g., written, oral, implied)
 - b. confidentiality (HIPAA)
 - c. American Hospital Association (AHA) Patient Care Partnership (Patient's Bill of Rights)
 - 1. privacy
 - 2. goal of care (e.g., definitive, palliative)
 - 3. access to information
 - 4. living will, advanced directive (e.g., DNR), health care proxy
 - 5. research participation
 - 2. legal issues
 - a. verification (e.g., patient identification, treatment site, prescription)
 - b. common terminology (e.g., battery, negligence, malpractice, beneficence)
 - c. legal doctrines (e.g., respondeat superior, res ipsa loquitur)
 - d. restraints versus immobilization
 - 3. ARRT Standards of Ethics
- B. Interpersonal Communications
 - 1. modes of professional communication
 - a. verbal/written
 - b. nonverbal (e.g., eye contact, touching)
 - 2. challenges in communication
 - a. interaction with others
 - 1. language barriers
 - 2. cultural and social factors
 - 3. physical or sensory impairments
 - 4. age
 - 5. emotional status, acceptance of condition (e.g., stage of grief)
 - b. explanation of medical terms
 - 3. patient education
 - a. explanation of treatment
 - b. strategies to improve understanding
 - c. treatment compliance (e.g., positioning, skin marks)
 - 4. support services
 - a. hospice
 - b. other professionals (e.g., dietitian, clergy, social services)

C. Physical Assistance

- 1. patient transfer and movement
 - a. body mechanics (e.g., balance, alignment, movement)
 - b. patient transfer techniques
 - c. fall prevention
- 2. assisting patients with medical equipment
 - a. infusion catheters and pumps
 - b. oxygen delivery systems
 - c. other (e.g., nasogastric tubes, urinary catheters, tracheostomy tubes)

D. Medical Emergencies

- 1. allergic reactions
 - a. contrast media
 - 1. contraindications
 - 2. adverse reactions
 - b. other (e.g., latex)
- 2. cardiac or respiratory arrest (e.g., CPR)
- 3. physical injury or trauma
- 4. other medical disorders (e.g., seizures, diabetic reactions)

*e.g., This is used here and in the remainder of this document to indicate examples of the topics covered, but not a complete list.

(Patient Care continues on the following page.)



Patient Care (continued)

E. Infection Control

1. cycle of infection
 - a. pathogen
 - b. reservoir
 - c. portal of exit
 - d. mode of transmission
 1. direct
 - a. direct contact
 - b. droplet
 2. indirect
 - a. airborne
 - b. vehicle-borne – fomite
 - c. vector-borne – mechanical or biological
 - e. portal of entry
 - f. susceptible host
2. asepsis
 - a. equipment disinfection
 - b. equipment sterilization
 - c. medical aseptic technique
 - d. sterile technique
3. CDC Standard Precautions
 - a. hand hygiene
 - b. use of personal protective equipment (e.g., gloves, gowns, masks)
 - c. safe needle practices
 - d. safe handling of contaminated materials
 - e. disposal of contaminated materials
 1. linens
 2. needles
 3. patient supplies
 4. blood and body fluids
4. transmission-based precautions
 - a. contact
 - b. droplet
 - c. airborne
5. additional precautions
 - a. neutropenic precautions (reverse isolation)
 - b. healthcare associated (nosocomial) infections

F. Handling and Disposal of Toxic or Hazardous Material

1. types of materials
 - a. metals (e.g., block alloy)
 - b. chemicals
 - c. chemotherapy
2. material safety data sheet (MSDS)

(Patient Care continues on the following page.)



Patient Care (continued)

2. Patient and Medical Record Management (22)

A. Evaluation

1. epidemiology and etiology
 - a. cancer risk factors
 - b. prevalence and incidence
2. cancer screening
3. signs and symptoms
4. history and physical examination
5. imaging studies (e.g., CT, MRI, PET/CT)
6. other diagnostic studies
 - a. lab results
 - b. surgical reports
 - c. pathology reports

B. Assessment

1. treatment side effects
 - a. signs and symptoms
 - b. causes
 - c. management
2. blood studies
 - a. types of studies (e.g., CBC, BUN, creatinine)
 - b. factors affecting blood values
3. dietary counseling
 - a. common problems
 - b. causes
 - c. dietary management
4. routine monitoring
 - a. weight
 - b. vital signs
 - c. signs and symptoms
 - d. documentation

C. Documentation

1. information included in treatment record
 - a. prescription
 - b. monitor units
 - c. target dose (daily and accumulated)
 - d. energy and type of radiation
 - e. date
 - f. time of day for b.i.d. treatment
 - g. fraction
 - h. elapsed days
 - i. field number and description
 - j. doses to other regions of interest
 - k. set-up instructions
2. elements of record keeping
 - a. patient identification
 - b. accountability (e.g., signatures)
 - c. accuracy and legibility
 - d. variance from prescription (errors, prescription changes)
 - e. medical events (definition and required documentation)
3. charge capture terminology
 - a. professional and technical components
 - b. CPT® principles



Safety (49)

1. Radiation Physics, Equipment, and Quality Assurance (20)

- A. Sources of Radiation
 - 1. radioactive material
 - 2. machine-produced radiation
- B. Basic Properties of Radiation
 - 1. wave characteristics
 - 2. attenuation
 - 3. inverse-square law
 - 4. x-ray beam quality
- C. Interactions with Matter
 - 1. photon interactions (e.g., Compton, photoelectric effect)
 - 2. electron interactions
 - 3. particle interactions (e.g., proton, neutron)
- D. Components and Operation
 - 1. linear accelerator
 - 2. CT simulator
- E. Quality Control Procedures
 - 1. warm-up and inspection of linear accelerators and CT simulators
 - a. interlock systems
 - b. safety lights
 - c. emergency switches
 - d. critical machine parameters (e.g., pressure, temperature)
 - e. electrical and mechanical hazards
 - f. imaging systems
 - 2. radiation output verification
 - a. methods
 - b. frequency
 - c. effect of environment (e.g., humidity) on measurements
 - 3. light and treatment field checks
 - a. light and radiation field agreement
 - b. collimator indicator agreement
 - c. multileaf collimator performance
 - d. sidelight/laser accuracy check (isocenter)
 - 4. rotation check
 - a. safety procedures
 - b. operation of gantry/console
 - 5. evaluation of quality assurance results
 - a. interpretation
 - b. course of action
 - c. documentation

2. Radiation Protection (29)

- A. Biological Effects of Radiation
 - 1. radiosensitivity
 - 2. dose-response relationships
 - 3. somatic effects
 - a. cellular
 - b. tissue (e.g., hemopoietic, skin, reproductive organs)
 - c. embryonic and fetal risks
 - d. carcinogenesis
 - e. early versus late effects
 - f. acute versus chronic effects
- B. Radiation Tissue Tolerance
 - 1. tolerance levels (TD_{5/5})
 - 2. adverse effects
 - 3. dose to critical structures
 - 4. radiobiological factors (e.g., dose, fractionation, volume)
 - 5. biological factors (e.g., age, anatomic variation, medical conditions)
 - 6. medical factors (e.g., prior surgery, pacemakers)
 - 7. other factors (e.g., radiosensitizers, radioprotectors)
 - 8. contribution from other sources
 - a. chemotherapy
 - b. brachytherapy¹
 - c. other fields (e.g., prior or abutting)
 - d. radiation effect modifiers

¹ Only basic concepts related to common uses of brachytherapy are covered, including dose to surrounding tissue and radiation protection issues. Specific procedures and isotope characteristics are not covered.

(Safety continues on the following page.)



Safety (continued)

- C. Measurement of Radiation
 - 1. units of measurement
 - a. absorbed dose
 - b. dose equivalent
 - c. exposure
 - 2. instrumentation
 - a. ionization chamber
 - b. Geiger-Müller detector
 - c. TLD/OSL (optically stimulated luminescence)
 - d. diodes
 - e. neutron detectors
- D. Fundamental Principles
 - 1. ALARA
 - 2. basic methods of protection (time, distance, shielding)
- E. Personnel Monitoring
 - 1. NCRP recommendations for personnel monitoring (report #116)
 - a. occupational exposure
 - b. public exposure
 - c. embryo/fetus exposure
 - 2. maintenance and evaluation of personnel dosimetry records
- F. Facilities and Area Monitoring
 - 1. NRC regulations (10 CFR, parts 20 and 35)
 - a. classification of areas (restricted, controlled, unrestricted)
 - b. required postings (signs)
 - c. area monitoring devices
 - 2. barrier requirements
 - a. primary
 - b. secondary
- G. Handling and Disposal of Radioactive Materials



Procedures (104)

1. Treatment Sites and Tumors (26)

- A. Anatomy, Pathophysiology, Lymphatic Drainage, and Metastatic Patterns
 1. brain and spinal cord
 2. head and neck (includes thyroid and salivary glands)
 3. breast
 4. lung
 5. abdomen, pelvis, GI, and GU
 - a. esophagus, stomach, small bowel, large bowel, rectum, and anus
 - b. pancreas, adrenals, liver, and gallbladder
 - c. ureters, kidneys, bladder, and urethra
 6. reproductive
 - a. prostate, testes
 - b. endometrium, cervix, ovaries, uterus, vagina, and vulva
 7. skeletal
 8. miscellaneous
 - a. lymphoma (Hodgkin and non-Hodgkin)
 - b. sarcomas (bone and soft tissue)
 - c. multiple myeloma
 - d. skin
 - e. leukemia
 - f. mycosis fungoides
 - g. bone marrow transplant
 - h. benign (e.g., heterotopic bone, keloid, AVM)
 - i. oncologic emergencies (e.g., whole brain, SVC, cord compression)
- B. Tumor Classification
 1. histopathologic types (e.g., benign, sarcomas, carcinomas)
 2. histopathologic grade
 - a. purpose (differentiation and growth rate)
 - b. grading system (e.g., GX, G1-G4)
 3. staging (basic concepts; not specific sites)
 - a. purpose
 - b. components (e.g., TNM, I-IV)

2. Treatment Volume Localization (18)

- A. Treatment Techniques and Anatomic Relationships
 1. radiation therapy techniques
 2. sectional and topographic anatomy
 3. critical organs
 4. patient positioning and immobilization
 5. types and uses of contrast media
- B. CT Simulation
 1. CT image acquisition (e.g., mA, slice thickness, and spacing)
 2. CT image processing and display (e.g., reconstruction, window level, field of view, CT number)
 3. contour volume and isocenter determination
 4. image transmission, storage, and retrieval
 5. programmable lasers
- C. Documentation of Simulation Procedure
 1. anatomic position
 2. equipment orientation
 3. accessory equipment
 4. field parameters
 5. set-up diagrams or photographs
 6. temporary and/or permanent reference marks

(Procedures continues on the following page.)



Procedures (continued)

3. Prescription and Dose Calculation (24)

- A. Treatment Prescription
 - 1. total target dose
 - 2. fractionation schedules
 - 3. beam energy
 - 4. types of radiation
 - 5. treatment volume (e.g., GTV, CTV, PTV)
 - 6. number of fields
 - 7. fixed/rotational fields
 - 8. field weighting
 - 9. field orientation
 - 10. treatment unit capabilities and limitations
 - 11. plan modifications
 - 12. beam modifiers
- B. Geometric Parameters and Patient Measurements
 - 1. field size and shape
 - 2. target depth
 - 3. patient thickness
 - 4. SSD, SAD
 - 5. collimator setting
 - 6. abutting fields (e.g., gap calculations)
 - 7. fusion with outside diagnostic studies
- C. Dose Calculation and Verification
 - 1. selection of energy
 - 2. equivalent square (open and blocked field)
 - 3. scatter factors (e.g., collimator, phantom)
 - 4. D_{max}
 - 5. percentage depth dose
 - 6. TAR, TMR
 - 7. SSD, SAD
 - 8. inverse square
 - 9. extended distance factors
 - 10. wedges (e.g., wedge angle or factor)
 - 11. off-axis calculation
 - 12. isodose curve characteristics (e.g., penumbra, DVH)
 - 13. factors for beam modifiers (e.g., tray factor, bolus, compensator)
 - 14. inhomogeneity correction factors
 - 15. rotational factors
 - 16. machine output data
 - 17. verification and documentation

4. Treatments (36)

- A. Treatment Options (indications, benefits, risks)
 - 1. chemotherapy
 - 2. surgery
 - 3. radiation therapy
 - a. external beam
 - b. brachytherapy²
 - 4. multimodality treatment
- B. Verification and Application of the Treatment Plan
 - 1. patient position
 - 2. isocenter
 - 3. treatment parameters (e.g., beam orientation, energy)
 - 4. prescription
 - 5. modality
 - a. 2D
 - b. 3D
 - c. 4D (e.g., respiratory gating)
 - d. IMRT
 - e. arc therapy
 - f. stereotactic
 - 6. imaging procedures
 - a. kV imaging
 - b. cone beam CT (CBCT)
 - c. MV imaging

² Only basic concepts related to common uses of brachytherapy are covered, including dose to surrounding tissue and radiation protection issues. Specific procedures and isotope characteristics are not covered.

(Procedures continues on the following page.)



Procedures (continued)

- C. Treatment Machine Set-Up
 - 1. auxiliary set-up devices
 - a. couch indexing
 - b. positioning aids
 - c. alignment lasers
 - 2. machine operations
 - a. SSD, SAD
 - b. collimator or cone settings
 - c. optical or mechanical distance indicator
 - d. gantry angle
 - e. collimator angle
 - f. field light
 - g. treatment couch
 - h. console controls
 - i. pendant controls
- D. Treatment Accessories
 - 1. beam modifiers
 - a. compensating filters
 - b. shielding
 - c. blocks (e.g., thickness, half value layer (HVL), half-value thickness (HVT))
 - d. multileaf collimation
 - e. bolus
 - f. wedges (enhanced dynamic wedge, physical wedge)
 - 2. immobilization devices
 - a. custom
 - b. standard
 - 3. parameters
 - a. SSD, SAD, depth
 - b. gantry, collimator, and field size settings
 - c. beam energy and type
- E. Treatment Administration
 - 1. patient monitoring
 - a. visual (mirror, TV monitor)
 - b. two-way voice communication system
 - c. back-up systems
 - d. monitoring regulations
 - e. emergency situations
 - 2. record and verify systems
 - 3. image acquisition and registration
 - 4. site verification
 - 5. dose verification (e.g., diodes, film)
 - 6. equipment malfunctions
 - a. types (e.g., radiation, electrical, mechanical, software)
 - b. troubleshooting and correction
 - c. documentation and reporting