

Radiologist Assistant Educational Program Recognition

General Information, Instructions, and

Application Materials



**The American Registry of Radiologic Technologists®
1255 Northland Drive
St. Paul, MN 55120**

(Version 2024.12.01)

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GENERAL INFORMATION

This application for recognition of a radiologist assistant educational program, hereinafter referred to as the “program”, incorporates the document titled *ARRT® Recognition Criteria for Radiologist Assistant Educational Programs*. That document identifies the areas to be addressed by the program in the application recognition process.

All questions regarding the application process should be directed to Chief Education Officer, at ARRT, 1255 Northland Drive, St. Paul, MN 55120-1155, 651-687-0048, extension 3184.

The *Radiologist Assistant Educational Program Application* is revised and implemented January 1, 2024.

APPLICATION MATERIALS

- The application package consists of five components: Part A (General Program Information); Part B (Statement of Understanding); Part C (Supporting Documentation List); Part D (Application Narrative); and Part E (Terminology).
- **Part A** (General Program Information) requests contact information for program officials and sponsoring institution officials, a list of currently enrolled radiologist assistant students, and a history of radiologist assistant graduate numbers.
- **Part B** (Statement of Understanding) attests to the signing program officials having read and understood the requirements for recognition of the radiologist assistant program.
- **Part C** (Supporting Documentation List) is an Exhibit Documentation List indicating the types of program records and information that should be included with the application as an appendix to demonstrate compliance with the recognition criteria.

Documentation submitted by the program for Part C may include public documents and internal confidential documents (e.g., technical reports, clinical facility procedure volume reports). Distribution of the materials will be restricted to ARRT Trustees, the radiologist assistant educational program evaluation committee members, and select ARRT staff. ARRT will not disclose information submitted by a program as part of the application process to any third person without the consent of the applicant.

- **Part D** (Application Narrative) requires the program to provide a summary explanation of how the program addresses each criterion. References to specific page numbers of documents included in Part C are used to support the narrative provided by the program.
- **Part E** (Definition of Terms) includes terminology used within this document.

NOTE: The program must retain a copy of all materials submitted to the ARRT.

SUBMISSION FORMAT

- Application materials must be submitted electronically through a restricted SharePoint Site. Application materials must follow the application format provided in Part D.



- An electronic version of the application materials document is available at www.arrt.org.
- An electronic document(s) with the completed application materials, including ALL exhibits scanned as a PDF file (.pdf) that is bookmarked (tabbed) to correspond to the tabs in the application (i.e. Tabs A – HH).

APPLICATION FEE

- The application fee is \$1800.

SUBMISSION OF COMPLETED MATERIALS

- Application materials should be uploaded to the secure SharePoint Site using a link provided to the educational program director. The same link will be used by program directors to submit materials for initial recognition and annual reporting.
- If your educational program is seeking recognition for the first time, the ARRT Chief Education Officer will send the program director a secure link upon receiving a letter of intent and application fee from the educational program.
 - The letter of intent and application fee should be sent **ATTENTION: Chief Education Officer, ARRT, 1255 Northland Drive, St. Paul, MN 55120-1155.**



ARRT EVALUATION AND INITIAL/CONTINUING RECOGNITION PROCESS

NOTIFICATION OF INTENT

- RA Program submits letter of intent to ARRT at least 30 days prior to submitting application materials
- ARRT confirms receipt of intent



APPLICATION FEE

- RA Program submits application fee to ARRT
- ARRT confirms receipt of payment



RECOGNITION APPLICATION

- RA Program submits application and supporting documents to ARRT
- ARRT confirms receipt application materials



CLINICAL DOCUMENTATION

- ARRT requests all clinical documentation on randomly selected RA Program student(s)
- RA Program submits requested clinical documentation
- ARRT confirms receipt of clinical documentation



ARRT BOARD DECISION

- Full ARRT Board makes a final decision on recognition for the RA Program



NOTIFICATION

- ARRT notifies the RA Program of the recognition decision



APPEAL

- If recognition is denied - the RA Program may appeal the decision



ANNUAL REPORT

- To maintain recognition all programs must submit an annual report along with specified documentation



ARRT EVALUATION AND INITIAL/CONTINUING RECOGNITION PROCESS (continued)

- Application materials for program recognition are reviewed twice annually and should be submitted by March 31 for review at the next July Board of Trustees meeting or by September 30 for review at the next January Board of Trustees meeting.
- Programs should submit a letter of intent to apply for recognition to the ARRT at least 30 days prior to submitting the application. The letter of intent allows ARRT to make arrangements for the application's review. Programs that submit an application without a letter of intent will be scheduled for review after those that did submit a letter. The Board of Trustees reserves the right to delay the review of an application to the next review cycle.
- Following receipt of the program's application for recognition, the ARRT will randomly select one or more student names from the program's list of students. The program will be notified to electronically submit copies of all clinical documentation (e.g., daily logs, clinical journals, signed evaluation forms, etc.) for the selected student(s) through the most recently completed semester. If students have not begun clinical at the time of program application, the program will be notified to provide an explanation of the clinical documentation plan (e.g., requirements, monitoring). All clinical documentation will be added to previously submitted application materials for review.
- If the submitted documentation is determined to be inadequate, the program is given one opportunity to provide additional documentation. If adequate documentation is not provided, the ARRT may schedule a visit to the program to review additional student files at the sponsoring institution. The sponsor shall be responsible for all reasonable expenses directly associated with the on-site review. If adequate education and/or documentation are not established, the program may be denied recognition or if already recognized, placed on probation, or have ARRT program recognition withdrawn.
- A sponsoring institution may be contacted by ARRT and requested to provide additional clarification prior to or during the application review.
- Applicants will be informed of recognition decisions no later than 30 days after the full Board reviews the application.
- The ARRT establishes the duration of recognition for new or existing programs based on the degree of compliance with the recognition requirements. Programs may be awarded initial recognition for a maximum period of three (3) years and continuing program recognition may be granted for a maximum of five (5) years.
- If an applicant program is denied recognition, the ARRT provides the right of sponsoring institutions to appeal the decision. A formal request to appeal the decision to deny recognition must be received by the ARRT within 30 calendar days of the non-recognition notification date. Appeals letters requesting reconsideration must indicate the specific findings of ineligibility being contested, the basis upon which the findings are being contested, and must be accompanied by a \$250 appeals fee.

CONTINUED RECOGNITION ONLY

- To maintain recognition, an annual report must be submitted, along with documentation specified on the annual report form.



Application Materials for Radiologist Assistant Educational Program Recognition

Submitted By

Name of Sponsoring Institution

To
The American Registry of Radiologic Technologists (ARRT[®])

Insert Date

Date



PART A: GENERAL PROGRAM INFORMATION

1. Program Information

Name of Sponsoring Institution: _____

Name of Sponsoring Institution Accrediting Agency: _____

Name of Program Director: _____

Academic and Certification Credentials of Program Director: _____

Program Mailing Address: _____

Program Director E-Mail: _____

Program Director Phone: _____

Program Director Fax: _____

Program Website: _____

2. Contact Person for Questions about this Application (if different than above)

Name: _____

Title: _____

Degree/Credentials: _____

Address: _____

E-mail: _____

Phone: _____

Fax: _____

3. Medical Advisor

Name: _____

Title: _____

Degree/Credentials: _____

Address: _____

E-mail: _____

Phone: _____

Fax: _____



4. Clinical Coordinator (required if >10 total students enrolled in program)

Name: _____
Title: _____
Degree/Credentials: _____
Address: _____
E-mail: _____
Phone: _____
Fax: _____

5. Sponsoring Institution Executive (e.g., President, CEO)

Name: _____
Title: _____
Degree/Credentials: _____
Address: _____
E-mail: _____
Phone: _____
Fax: _____



6. Radiologist Assistant Student Enrollment List

Student Name	Program Start Date	Program End Date	Primary Clinical Site(s) Name & Address
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			
16.			
17.			
18.			
19.			
20.			
21.			
22.			
23.			
24.			
25.			

7. Radiologist Assistant Graduate History

Number of Program Graduates by Year:
(List most recent year first.)

Year	Number



Program
Name: _____

PART B: STATEMENT OF UNDERSTANDING

Print and sign the *Statement of Understanding* provided as a part of the required application documentation. Insert the signed *Statement of Understanding* at this location as a PDF in your electronic application.

RADIOLOGIST ASSISTANT EDUCATIONAL PROGRAM
STATEMENT OF UNDERSTANDING

VERIFICATION

By our signatures below, we represent that the Applicant has read, understands, and will comply with the *ARRT® Recognition Criteria for Radiologist Assistant Educational Programs*; that all information provided by the Applicant in connection with this Application for Radiologist Assistant Educational Program Recognition is true, correct, and complete to the best of our knowledge and belief; and that, in the event of a material change in the Program after submission of this Application but before the ARRT Board of Trustees renders its decision, the Applicant will notify the ARRT of the existence and nature of any such change.

AGREEMENT

In consideration of the ARRT's decision, if any, to grant Recognition, the Applicant acknowledges and agrees that it shall:

- A. Annually complete and submit information requested by the ARRT on the then current status of the recognized radiologist assistant educational program.
- B. Promptly report any material change in purpose, structure, or activities of the recognized radiologist assistant educational program to the ARRT.
- C. Report any material change in the scope or objectives of the recognized radiologist assistant educational program to the ARRT.
- D. Furnish any and all information that the ARRT may require to investigate whether the program complies with *ARRT® Recognition Criteria for Radiologist Assistant Educational Programs*.

Sponsoring Institution Executive Signature

Program Director Signature

Printed Name and Title (Sponsoring Institution Executive)

Printed Name and Title

Date Signed

Date Signed



PART C: SUPPORTING DOCUMENTATION LIST

Include the completed Exhibit Documentation List on the next page as part of your application; it will serve as a guide to the materials you present in your appendix.

The Exhibit Documentation List provides functional titles for documents. The specific mechanism, title and document may vary by program. For example, your mechanism for obtaining student feedback may be different than a course evaluation form as indicated in *Appendix G: Course Evaluation Forms*. Provide documentation related to your student feedback mechanism in Appendix G and provide an explanation of the process and/or how it relates to criteria that list Appendix G (e.g., 3.6.5 and 3.7.4). If *Course Evaluation Forms* are discussed with the Advisory Committee include it under criterion 3.4.

Sponsoring institutions may combine some listed documents into one report, manuscript, or handbook. For example, the *College Catalog* may include the *Mission Statement*, *Curriculum*, *Course Descriptions*, etc. If a title/description is included in another document, make a reference note. For example, if the *Radiologist Assistant Curriculum* is included in the *College Catalog*, write 'See Appendix B' in the "Refer To" column for the *Radiologist Assistant Curriculum* line.

All items (by title or subject description) in the Exhibit Documentation List (Part C) should be referenced somewhere in the application form (Part D) to support the educational program's compliance with the recognition criteria. Other forms of documentation that you choose to include may be added to the Exhibit Documentation List (Part C).

If supporting documentation is published only on a website, this material should be printed out, scanned, saved as a PDF, and attached to the appropriate appendix provided in Part C. References to specific URLs, in lieu of printed documentation, will not be accepted.

For the ARRT-required forms for Appendix I and Appendix CC, follow the Exhibit Documentation List. Complete these forms and include them in the corresponding appendix.

Following receipt of the program's application for recognition, the ARRT will randomly select one or more student names from the program's list of students (on page 4 of the application). The program will be notified to electronically submit copies of all clinical documentation (e.g., daily logs, clinical journals, signed evaluation forms, etc.) for the selected student(s) through the most recently completed semester. If students have not begun clinical at the time of program application, please provide an explanation of the clinical documentation plan (e.g., requirements, monitoring, etc.). ARRT will add these documents to Appendix AA.



EXHIBIT DOCUMENTATION LIST

Appendix	Title/Description	Refer To:
A	Mission Statement/Purpose of Radiologist Assistant Program	
B	College or Program Catalog	
C	Radiologist Assistant Program Information, Brochure, Application, and/or Program Handbook	
D	Radiologist Assistant Curriculum	
E	Course Descriptions (all RA courses)	
F	Course Syllabi, including course-specific grading criteria (all RA courses)	
G	RA Course Evaluation Forms (most recent summary for each)	
H	Policies and Procedures Document(s)	
I	Program Advisory Committee (see form on page 10)	
J	Program Advisory Committee Actions/Minutes	
K	Department, Division, Program Organizational Chart	
L	Program Director Job Description	
M	Clinical Coordinator Job Description (Required if > 10 students total)	
N	Program Director and Faculty Resumes	
O	Medical Advisor ABR or AOBR Certificate and State License (submit current copy)	
P	Medical Advisor Job Description	
Q	Clinical Education Standards, Policies, and Procedures	
R	Clinical Site(s) Annual Report of Medical Imaging and Interventional Procedures (with differentiation of pediatric and geriatric patients)	
S	Validation of TJC, AOA, or DNV Accreditation, or equivalent standards for healthcare quality and patient safety, for each Major Clinical Facility	
T	Clinical Facility and Program Agreement(s) for all clinical sites and all students	
U	Radiology Practice, Program, all Chief Preceptor(s), and Student Agreement(s) for all clinical sites and all students	
V	Clinical Preceptor Standards and Procedures	
W	Documentation of Program Official's Visits to Clinical Site(s)	



X	All preceptor(s) ABR or AOBR Certificate(s) and State License(s) (submit current copy(s))	
Y	Preceptor Orientation and Input Mechanism(s)	
Z	Clinical documentation of student(s) selected by ARRT	<i>To be provided upon ARRT request</i>
AA	Clinical Competence Assessment Form(s)	
BB	General Clinical Evaluation Form	
CC	Program Clinical Experience and Competence Requirements (see form on page 11-13)	<i>Also available on ARRT's website in Didactic and Clinical Competency Requirements</i>
DD	Certificate or Letter of Recognition from ARRT-recognized Institutional Accreditor for Educational Institution	
EE	Certificate or Letter of Recognition from ARRT-recognized Specialized Accreditor	
FF	RA Program Outcomes Assessments	
GG	Healthcare Institution Sponsored Programs and Post-Secondary Educational Institution Affiliation Agreement	<i>Healthcare Institution Sponsored Program ONLY</i>
HH	Documentation of Healthcare Institution Program Official's coordination with affiliated educational institution to provide didactic education	<i>Healthcare Institution Sponsored Program ONLY</i>
II	Other	



APPENDIX I: PROGRAM ADVISORY COMMITTEE FORM

Name	Representing	Term Start / Term End

If the Medical Advisor, faculty, preceptors, employer, students, and graduates are not represented on your Program Advisory Committee, please explain why not.



APPENDIX : Summary of Clinical Experience and Competence Assessments

Form CR – 1 Sample	Experience Documentation			Competence Assessment Date
Procedure	Mandatory or Elective	Minimum and Maximum Number of Repetitions		
		Min	Max	
Gastrointestinal and Chest				
Esophageal study – must fluoro and image the esophagus, may be with UGI	Mandatory	20	50	
Swallowing function study (participate in procedure and provide initial observations to radiologist)	Mandatory	10	50	
Upper GI study	Mandatory	15	50	
Small bowel study – direct the study and spot TI	Mandatory	10	25	
Enema with barium, air, or water soluble contrast	Mandatory	10	50	
Nasogastric/enteric and orogastric/enteric tube placement – may not require image guidance	Mandatory	10	25	
Percutaneous, nasogastric/enteric or orogastric/enteric tube evaluation – verification with contrast injection	Mandatory	10	25	
T-tube cholangiogram	Elective	5	15	
Post-operative Esophageal or Upper GI study (e.g., bariatric surgery, anastomosis check)	Mandatory	10	25	
Chest fluoroscopy	Elective	5	15	
Genitourinary		Min	Max	
Antegrade urography through existing tube (e.g., , nephrostography)	Elective	5	15	
Cystography, voiding cystography, or voiding cystourethrography	Mandatory	10	30	
Retrograde urethrography or urethrocystography	Elective	5	15	
Loopography (urinary diversion)	Elective	5	15	
Hysterosalpingography – imaging only	Elective	5	15	
Hysterosalpingography – procedure and imaging	Elective	10	25	
Invasive Nonvascular		Min	Max	



Form CR – 1 Sample	Experience Documentation			Competence Assessment Date
	Mandatory or Elective	Minimum and Maximum Number of Repetitions		
Procedure				
Arthrogram (radiography, CT, and MR) with a minimum of 5 shoulder and 5 hip	Mandatory	20	50	
Therapeutic joint injection	Elective	10	20	
Diagnostic joint aspiration	Elective	10	20	
Therapeutic bursa aspiration and/or injection	Elective	10	20	
Lumbar puncture with or without contrast	Mandatory	10	50	
Cervical, thoracic, or lumbar myelography – imaging only	Mandatory	5	15	
Thoracentesis with or without catheter	Mandatory	15	40	
Placement of catheter for pneumothorax	Elective	15	25	
Paracentesis with or without catheter	Mandatory	20	50	
Abscess, fistula, or sinus tract study	Elective	5	20	
Injection for sentinel node localization	Elective	5	20	
Percutaneous drainage with or without placement of catheter (excluding paracentesis and thoracentesis)	Elective	15	30	
Change of percutaneous tube or drainage catheter	Elective	10	30	
Thyroid biopsy	Elective	15	50	



Form CR – 1 Sample (continued)	Experience Documentation			Actual Number Completed	Competence Assessment Date
	Procedure	Mandatory or Elective	Minimum and Maximum Number of Repetitions		
Superficial lymph node biopsy	Elective	15	50		
Liver biopsy (non-targeted)	Elective	20	50		
Superficial soft tissue mass biopsy	Elective	15	50		
Invasive Vascular		Min	Max		
Peripherally inserted central catheter (PICC) placement	Mandatory	10	30		
Insertion of non-tunneled central venous catheter	Elective	20	50		
Central venous catheter or port injection	Elective	5	30		
Tunneled venous catheter removal	Elective	10	30		
Extremity venography	Elective	5	15		
Post-Processing		Min	Max		
Perform CT post-processing	Elective	5	15		
Perform MR post-processing	Elective	5	15		
Total Number of Cases	_____ /500				

Chief Preceptor Signature and Date _____

Program Director Signature and Date _____

Candidate Signature and ARRT ID # and Date _____



PART D: APPLICATION NARRATIVE

Each ARRT criterion is identified in Part D and followed by a suggested list of resources that may demonstrate how a program meets that criterion.

The application narrative should reflect the program's compliance with ARRT's recognition criteria through an explanation with reference to specific sections or statements within supporting documents provided in the appendix (Exhibit Documentation List).

References cited must specify page numbers (if appropriate) within the documents provided in the appendix.

If there are no existing reports or documents to support compliance with a criterion, an explanation as to why no documentation exists must be provided in the comment area of Part D.



Section 1 Introduction and Curriculum

Candidates for ARRT certification as a Registered Radiologist Assistant (R.R.A.[®]) must successfully complete a radiologist assistant educational program that is recognized by ARRT. ARRT will recognize radiologist assistant educational programs that meet the criteria noted herein. The goal of these criteria is to reinforce the educational expectations underlying ARRT certification.

- 1.1 The radiologist assistant educational program must show that it provides appropriate upper division coursework or affiliates with an post-secondary educational institution accredited by a mechanism recognized by ARRT that provides appropriate upper division coursework, that leads to a minimum of a baccalaureate degree or post-baccalaureate certificate and that addresses the topics listed in the [ARRT[®] Content Specifications for the Registered Radiologist Assistant Examination](#). These topics are presented in a format suitable for the instructional planning of upper division coursework in the *ASRT Radiologist Assistant Curriculum*.

NOTE:

“All students graduating January 1, 2024 or later must earn a minimum of a master’s degree or post-master’s certificate to be eligible for ARRT certification and registration as a Registered Radiologist Assistant.”

Upper-division coursework is coursework awarded an academic designation equivalent, at minimum, to courses typically required in the final two years of a baccalaureate program. Such courses provide specialized and in-depth coverage of content and that emphasize problem-solving and analytical thinking skills. These courses build upon the foundational knowledge, skills and abilities obtained through radiography education, certification, and experience. Such coursework requires the student to synthesize topics from a variety of sources, including the coursework previously received through a radiography program. Radiologist assistant coursework requires the academic and clinical application of theories and methods of patient assessment, patient management, patient education, and radiology procedures performance, as well as systematic analysis of the quality of patient care delivered within the radiology environment. Radiologist assistant courses must lead to the development of specific intellectual and professional skills that underlie the performance of radiologist assistant responsibilities.

Supporting Documentation:

- Appendix B: College or Program Catalog
- Appendix D: Radiologist Assistant Curriculum
- Appendix E: RA Course Descriptions (all courses)
- Appendix F: Course Syllabi (all RA courses)
- Appendix L: Program Director Job Description
- Appendix N: Program Director and RA Faculty Resumes



Appendix DD: Certificate or Letter of Recognition from ARRT-recognized Institutional Accreditor for Educational Institution

Documentation Appendix Page		Provide explanation below to support compliance



Section 2 General Requirements

- 2.1 The educational program must be offered through a post-secondary institution accredited by an institutional accreditor recognized by ARRT and must document to ARRT compliance with the requirements in Section 3.

OR

The educational program must be offered through a healthcare institution that affiliates with a post-secondary institution accredited by an institutional accreditor recognized by ARRT and must document to ARRT compliance with the requirements in Section 3.

Institutional accreditors must be recognized by the Council on Higher Education Accreditation (CHEA) and/or the United States Department of Education (USDE) and if such recognition is a National Institutional Accrediting Organization, must have a scope of recognition inclusive of radiologic technology or allied health in order to be recognized by ARRT.

Supporting Documentation:

Appendix DD: Certificate or Letter of Recognition from ARRT-recognized Institutional Accreditor for Educational Institution

Documentation Appendix	Page	Provide explanation below to support compliance

- 2.1.1 The educational program assumes responsibility for the quality of didactic and clinical education presented to each student.

2.1.2 Healthcare Institution Sponsored Programs – ONLY

Healthcare Institution sponsored educational programs must document to ARRT's satisfaction that each candidate for Registered Radiologist Assistant (R.R.A.®) certification, at the time of application to ARRT, has received didactic education that meets the requirements noted in the ARRT *Content Specifications for the Registered Radiologist Assistant Examination*. These topics should be covered as part of a nationally recognized radiologist assistant curriculum such as the one published by the American Society of Radiologic Technologists (ASRT).

Supporting Documentation:

Appendix C: Radiologist Assistant Program Information, Brochure, Application and/or Program Handbook

Appendix H: Policies and Procedures Document(s)

Appendix Q: Clinical Education Standards, Policies, and Procedures



- Appendix T: Clinical Facility and Program Agreement(s) for all clinical sites and all students
- Appendix U: Radiology Practice, Program, all Chief Program Preceptor(s), and Student Agreement(s) for all clinical sites and all students
- Appendix V: Clinical Preceptor Standards and Procedures
- Appendix W: Documentation of Program Official's Visits to Clinical Site(s)
- Appendix Y: Preceptor Orientation and Input Mechanism(s)
- Appendix GG: Healthcare Institution Sponsored Programs and Post-Secondary Educational Institution Affiliation Agreement
- Appendix HH: Documentation of Healthcare Institution Program Official's coordination with affiliated educational institution to provide didactic education

Documentation Appendix	Page	Provide explanation below to support compliance



Section 3 Clinical Education Documentation

3.1 Educational programs must document to ARRT’s satisfaction that each candidate for Registered Radiologist Assistant (R.R.A.®) certification, at the time of application to ARRT, has received clinical education that meets the requirements noted in this section.

NOTE: Candidates completing an educational program prior to January 1, 2025, must complete the equivalent of at least one year of full-time patient care related clinical experience in medical imaging following radiography certification and registration. The clinical experience may be earned concurrent to the radiologist assistant educational program activities. Candidates completing an educational program on or after January 1, 2025, must complete the equivalent of at least two years of full-time patient care related clinical experience in medical imaging following radiography certification. The clinical experience may not be earned concurrent to the radiologist assistant educational program activities.

In addition, to ensure the highest level of patient care, candidates must document current advanced cardiac life support (ACLS) certification. The candidate will provide a copy of current ACLS certification when submitting the application.

Supporting Documentation:

- Appendix Q: Clinical Education Standards, Policies, and Procedures
- Appendix BB: General Clinical Evaluation Form
- Appendix CC: Program Clinical Experience and Competence Requirements Form

Documentation Appendix	Page	Provide explanation below to support compliance

3.2 Program Director

3.2.1 The Program Director should hold ARRT registration in Radiography (R) or Radiologist Assistant (R.R.A.). If the Program Director is not registered in Radiography (R) or as a Registered Radiologist Assistant (R.R.A.), an institutionally Authorized Faculty Member who is certified in Radiography or as a Registered Radiologist Assistant (R.R.A.) must be responsible for evaluating the didactic and/or clinical effectiveness.

Supporting Documentation:

In the narrative, identify the Program Director or Authorized Faculty Member [if the program director is not registered in Radiography (R) or as a Registered Radiologist Assistant (R.R.A.)]



Appendix L: Program Director Job Description

Documentation		Provide explanation below to support compliance
Appendix	Page	

- 3.2.2 The Program Director is responsible for overall program effectiveness to include:
- implementation of ARRT-recognized RA curriculum
 - student advising
 - evaluation of student learning and program effectiveness outcomes.

Supporting Documentation:

- 3.2.3 The Program Director works collaboratively with the Medical Advisor to assure clinical experience effectiveness (See 3.3.1).

Supporting Documentation:

Appendix L: Program Director Job Description

Documentation		Provide explanation below to support compliance
Appendix	Page	

3.3 Medical Advisor

- 3.3.1 The Medical Advisor, along with the Program Director, must verify that the clinical education available through the preceptorship is:
- of appropriate quality (clinical site has a variety and volume of examinations to allow students an opportunity to participate in at least the minimum number of required repetitions),
 - depth (patient population presents with a range of characteristics (e.g., pediatric, adult, geriatric) and conditions (e.g., trauma, outpatient, critical)).

Supporting Documentation:

Appendix L: Program Director Job Description
 Appendix M: Clinical Coordinator Job Description (If > 10 students total)
 Appendix P: Medical Advisor Job Description
 Appendix R: Clinical Site(s) Annual Report of Medical Imaging and Interventional Procedures (with differentiation of pediatric and geriatric patients)



3.3.2 The Medical Advisor must be a diplomate of the American Board of Radiology (ABR) or the American Osteopathic Board of Radiology (AOBR), in the appropriate discipline, and must possess a current license to practice medicine.

Supporting Documentation:

Appendix O: Medical Advisor ABR or AOBR Certificate and State License (submit current copy)

Documentation Appendix	Page	Provide explanation below to support compliance

3.3.3 The Medical Advisor is appointed to the Program Advisory Committee and participates in the Program Advisory Committee meetings.

Supporting Documentation:

Appendix I: Program Advisory Committee Form

Appendix J: Program Advisory Committee Actions/Minutes

Documentation Appendix	Page	Provide explanation below to support compliance

3.3.4 The Medical Advisor contacts each new preceptor to facilitate an understanding of the program goals and the role of the clinical education site and serves as a resource for the clinical preceptor(s).

Supporting Documentation:

Appendix P: Medical Advisor Job Description

Documentation Appendix	Page	Provide explanation below to support compliance



3.4 Program Advisory Committee

Educational programs must maintain a Program Advisory Committee composed of the Medical Advisor, faculty, preceptors, employers, and student and/or graduate representatives to assist the Program Director in ensuring program quality. The Program Advisory Committee must have a mechanism to gather input from preceptors, graduates, and employers. The input received from the Program Advisory Committee must be used for program improvement. The Advisory Committee must meet at least annually. Meeting minutes from Advisory Committee meetings must be submitted with the Annual Report to maintain recognition.

Supporting Documentation:

- Appendix G: Course Evaluation Forms (most recent summary for each RA course)
- Appendix I: Program Advisory Committee Form
- Appendix J: Program Advisory Committee Actions/Minutes
- Appendix K: Department, Division, Program Organizational Chart
- Appendix L: Program Director Job Description
- Appendix M: Clinical Coordinator Job Description (Required if > 10 students total)
- Appendix V: Clinical Preceptor Standards and Procedures
- Appendix Y: Preceptor Orientation and Input Mechanism(s)

Documentation		Provide explanation below to support compliance
Appendix	Page	



3.5 Clinical Agreement

3.5.1 There must be a formal written agreement(s) among the educational program (or the institution(s) of which it is a part), the student, the radiology practice, and practice/clinical facility (or facilities) with which the Preceptor is associated. To promote continuity of education within the clinical site, the agreement must be with the radiology practice rather than with an individual radiologist within the practice. The radiology practice agreement must include the Preceptor’s duties (see Section 3.6 Preceptor Qualifications and Duties) or reference the Preceptor agreement if Preceptor duties are not included in the facility agreement.

If the sponsoring institution of the program is a healthcare institution that serves as the only clinical site for the program, this should be documented in the clinical agreements with the student and radiology practice with which the Preceptor is associated.

If the sponsoring institution of the program is a healthcare institution that also utilizes clinical facilities outside of the healthcare institution, there must be a formal written agreement(s) among the educational program (or the institution(s) of which it is a part), the student, the radiology practice, and practice/clinical facility (or facilities) with which the Preceptor is associated.

Supporting Documentation:

Appendix T: Clinical Facility and Program Agreement(s) for all clinical sites and all students

Appendix U: Radiology Practice, Program, all Chief Preceptor(s), and Student Agreement(s) for all clinical sites and all students

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3.5.2 The responsibilities of each of the parties must be indicated within the agreement(s) and must address, at minimum, all items noted in Sections 3.4 and 3.5 of this document.

Supporting Documentation:

Appendix T: Clinical Facility and Program Agreement(s) for all clinical sites and all students

Appendix U: Radiology Practice, Program, all Chief Preceptor(s), and Student Agreement(s) for all clinical sites and all students

Appendix CC: Program Clinical Experience and Competence Requirements Form



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3.5.3 The agreement must be signed by a representative of each of the parties (i.e., clinical facility, educational institution, chief preceptor, student) who is authorized to enter into legal agreements on behalf of the entity.

Supporting Documentation:

- Appendix L: Program Director Job Description
- Appendix M: Clinical Coordinator Job Description (If >10 students total)
- Appendix T: Clinical Facility and Program Agreement(s) for all clinical sites and all students
- Appendix U: Radiology Practice, Program, all Chief Preceptor(s), and Student Agreement(s) for all clinical sites and all students

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3.5.4 One radiologist within the radiology practice must be designated as the Chief Preceptor.

Supporting Documentation:

- Appendix V: Clinical Preceptor Standards and Procedures
- Appendix X: All Preceptor(s) ABR or AOBR Certificate(s) and State License(s) (submit current copy(s))
- Appendix Y: Preceptor Orientation and Input Mechanism(s)

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3.5.5 Liability insurance coverage for the student must be addressed.

Supporting Documentation:

- Appendix Q: Clinical Education Standards, Policies, and Procedures
- Appendix T: Clinical Facility and Program Agreement(s) for all clinical sites and all students
- Appendix U: Radiology Practice, Program, all Chief Preceptor(s), and Student Agreement(s) for all clinical sites and all students

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3.5.6 Physical resources (e.g., suitable didactic learning environment, learning resources, clinical space, personnel protective equipment, personnel radiation monitoring) must be addressed.

Supporting Documentation:

- Appendix Q: Clinical Education Standards, Policies, and Procedures
- Appendix R: Clinical Site(s) Annual Report of Medical Imaging and Interventional Procedures (with differentiation of pediatric and geriatric patients)
- Appendix T: Clinical Facility and Program Agreement(s) for all clinical sites and all students
- Appendix U: Radiology Practice, Program, all Chief Preceptor(s), and Student Agreement(s) for all clinical sites and all students

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3.6 Preceptor Qualifications and Duties

3.6.1 Preceptors must be ABR or AOBR certified with appropriate practice privileges.

Supporting Documentation:

Appendix X: All Preceptor(s) ABR or AOBR Certificate(s) and State License(s) (submit current copy(s))

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3.6.2 Preceptors must agree to commit the time and effort required to assure that the student receives a clinical education of depth and scope consistent with the ARRT's Role Delineation.

Supporting Documentation:

Appendix U: Radiology Practice, Program, all Chief Preceptor(s), and Student Agreement(s) for all clinical sites and all students

Appendix V: Clinical Preceptor Standards and Procedures

Appendix Y: Preceptor Orientation and Input Mechanism(s)

Appendix AA: Clinical Competence Assessment Form(s)

Appendix BB: General Clinical Evaluation Form

Appendix CC: Program Clinical Experience and Competence Requirements Form

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3.6.3 Preceptors must be willing and able to perform clinical competence assessments.

Supporting Documentation:

- Appendix U: Radiology Practice, Program, all Chief Preceptor(s), and Student Agreement(s) for all clinical sites and all students
- Appendix V: Clinical Preceptor Standards and Procedures
- Appendix Y: Preceptor Orientation and Input Mechanism(s)
- Appendix Z: Clinical documentation of student(s) selected by ARRT
- Appendix AA: Clinical Competence Assessment Form(s)
- Appendix BB: General Clinical Evaluation Form
- Appendix CC: Program Clinical Experience and Competence Requirements Form

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3.6.4 Preceptors must agree to complete the documentation of clinical experience and competence as required by ARRT clinical education requirements, including the following forms from the [ARRT Didactic and Clinical Portfolio Requirements for Certification as a Registered Radiologist Assistant](#):

- Clinical Experience Documentation and Competence Assessment;
- Clinical Competence Assessment Forms A - E;
- Summative Evaluation Rating Scales.

Supporting Documentation:

- Appendix L: Program Director Job Description
- Appendix M: Clinical Coordinator Job Description (If > 10 students total)
- Appendix U: Radiology Practice, Program, all Chief Preceptor(s), and Student Agreement(s) for all clinical sites and all students
- Appendix V: Clinical Preceptor Standards and Procedures
- Appendix Y: Preceptor Orientation and Input Mechanism(s)
- Appendix AA: Clinical Competence Assessment Form(s)
- Appendix CC: Program Clinical Experience and Competence Requirements Form

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3.6.5 Preceptors must agree to work with the Medical Advisor, as needed, to ensure that the medical components of the clinical preceptorship meet acceptable standards.

Supporting Documentation:

- Appendix G: Course Evaluation Forms (most recent summary for each RA course)
- Appendix L: Program Director Job Description
- Appendix M: Clinical Coordinator Job Description (If > 10 students total)
- Appendix O: Medical Advisor Job Description
- Appendix R: Clinical Site(s) Annual Report of Medical Imaging and Interventional Procedures (with differentiation of pediatric and geriatric patients)
- Appendix T: Clinical Facility and Program Agreement(s) for all clinical sites and all students
- Appendix U: Radiology Practice, Program, all Chief Preceptor(s), and Student Agreement(s) for all clinical sites and all students
- Appendix V: Clinical Preceptor Standards and Procedures
- Appendix Y: Preceptor Orientation and Input Mechanism(s)
- Appendix AA: Clinical Competence Assessment Form(s)
- Appendix BB: General Clinical Evaluation Form

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3.7 Characteristics of Acceptable Preceptor Site(s)

3.7.1 The facility (or facilities) within which the student performs the majority of clinical activities must be accredited by a recognized agency [e.g., The Joint Commission (TJC), American Osteopathic Association (AOA), Det Norske Veritas (DNV)] or meet equivalent standards for healthcare quality and patient safety.

Supporting Documentation:

Appendix S: Validation of TJC, AOA, or DNV Accreditation, or equivalent standards for healthcare quality and patient safety, for each Major Clinical Facility

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3.7.2 The case load must be sufficient to provide opportunities for the student to gain clinical proficiency in the procedures noted in the [ARRT Didactic and Clinical Portfolio Requirements for Certification and Registration as a Registered Radiologist Assistant](#) document, but not so great as to leave insufficient time to educate the student.

Supporting Documentation:

Appendix Q: Clinical Education Standards, Policies, and Procedures
 Appendix R: Clinical Site(s) Annual Report of Medical Imaging and Interventional Procedures (with differentiation of pediatric and geriatric patients)
 Appendix T: Clinical Facility and Program Agreement(s) for all clinical sites and all students
 Appendix U: Radiology Practice, Program, all Chief Preceptor(s), and Student Agreement(s) for all clinical sites and all students
 Appendix V: Clinical Preceptor Standards and Procedures
 Appendix Z: Clinical documentation of student(s) selected by ARRT
 Appendix CC: Program Clinical Experience and Competence Requirements Form

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3.7.3 The case mix available to the student must present a range of patient ages and conditions.

Supporting Documentation:

- Appendix Q: Clinical Education Standards, Policies, and Procedures
- Appendix R: Clinical Site(s) Annual Report of Medical Imaging and Interventional Procedures (with differentiation of pediatric and geriatric patients)
- Appendix Z: Clinical documentation of student(s) selected by ARRT
- Appendix CC: Program Clinical Experience and Competence Requirements Form

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3.7.4 Educational programs must ensure that all mandatory clinical activities and a number of elective clinical activities sufficient to meet ARRT requirements are available in clinical preceptorship.

Supporting Documentation:

- Appendix G: Course Evaluation Forms (most recent summary for each RA course)
- Appendix L: Program Director Job Description
- Appendix M: Clinical Coordinator Job Description (If > 10 students total)
- Appendix Q: Clinical Education Standards, Policies, and Procedures
- Appendix R: Clinical Site(s) Annual Report of Medical Imaging and Interventional Procedures (with differentiation of pediatric and geriatric patients)
- Appendix Z: Clinical documentation of student(s) selected by ARRT
- Appendix CC: Program Clinical Experience and Competence Requirements Form

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3.8 Clinical Education Activities

3.8.1 Clinical activities should emphasize the education of the student as opposed to the productivity enhancement provided by the student.

Supporting Documentation:

- Appendix G: Course Evaluation Forms (most recent summary for each RA course)
- Appendix H: Policies and Procedures Document(s)
- Appendix L: Program Director Job Description
- Appendix M: Clinical Coordinator Job Description (If > 10 students total)
- Appendix Q: Clinical Education Standards, Policies, and Procedures
- Appendix R: Clinical Site(s) Annual Report of Medical Imaging and Interventional Procedures (with differentiation of pediatric and geriatric patients)
- Appendix T: Clinical Facility and Program Agreement(s) for all clinical sites and all students
- Appendix U: Radiology Practice, Program, all Chief Preceptor(s), and Student Agreement(s) for all clinical sites and all students
- Appendix V: Clinical Preceptor Standards and Procedures
- Appendix Y: Preceptor Orientation and Input Mechanism(s)
- Appendix Z: Clinical documentation of student(s) selected by ARRT
- Appendix CC: Program Clinical Experience and Competence Requirements Form

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3.8.2 A minimum number of contact hours between the Preceptor and student must be specified and must be sufficient to meet the goals reflected in the [ARRT Didactic and Clinical Portfolio Requirements for Certification and Registration as a Registered Radiologist Assistant](#) document.

Supporting Documentation:

- Appendix E: RA Course Descriptions (all courses)
- Appendix Q: Clinical Education Standards, Policies, and Procedures
- Appendix U: Radiology Practice, Program, all Chief Preceptor(s), and Student Agreement(s) for all clinical sites and all students
- Appendix V: Clinical Preceptor Standards and Procedures
- Appendix Y: Preceptor Orientation and Input Mechanism(s)
- Appendix Z: Clinical documentation of student(s) selected by ARRT
- Appendix CC: Program Clinical Experience and Competence Requirements Form

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3.8.3 A minimum duration of the preceptorship must be specified and must be sufficient to meet the goals reflected in the [ARRT Didactic and Clinical Portfolio Requirements for Certification and Registration as a Registered Radiologist Assistant](#) document.

Supporting Documentation:

- Appendix D: Radiologist Assistant Curriculum
- Appendix E: RA Course Descriptions (all courses)
- Appendix H: Policies and Procedures Document(s)
- Appendix Q: Clinical Education Standards, Policies, and Procedures
- Appendix R: Clinical Site(s) Annual Report of Medical Imaging and Interventional Procedures (with differentiation of pediatric and geriatric patients)
- Appendix T: Clinical Facility and Program Agreement(s) for all clinical sites and all students
- Appendix U: Radiology Practice, Program, all Chief Preceptor(s), and Student Agreement(s) for all clinical sites and all students
- Appendix V: Clinical Preceptor Standards and Procedures
- Appendix Z: Clinical documentation of student(s) selected by ARRT
- Appendix CC: Program Clinical Experience and Competence Requirements Form

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3.8.4 A Clinical Coordinator faculty member is required if the total student enrollment is greater than ten (10).

Supporting Documentation:

- Appendix I: Program Advisory Committee Form
- Appendix K: Department, Division, Program Organizational Chart
- Appendix M: Clinical Coordinator Job Description (Required if > 10 students total)
- Appendix N: Program Director and Faculty Resumes

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3.8.5 Program official(s) monitor the clinical effectiveness.

Supporting Documentation:

- Appendix L: Program Director Job Description
- Appendix M: Clinical Coordinator Job Description (Required if > 10 students total)
- Appendix W: Documentation of Program Official's Visits to Major Clinical Site(s)
(If a program official does not visit major clinical sites, please provide an explanation of how program contact is maintained with the major clinical sites and how evaluation of the clinical site is completed.)

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PART E: DEFINITION OF TERMS

Educational Institution: a post-secondary institution accredited by an institutional accreditor recognized by ARRT.

Healthcare Institution: a public or nonprofit organization that provides health care and related services.

Sponsoring Institution: an educational or healthcare institution that sponsors the radiologist assistant educational program.

Advisory Committee: committee composed of the Medical Advisor, faculty, preceptors, employers, and student and/or graduate representatives to assist the Program Director in ensuring program quality.

Educational Program: a radiologist assistant educational program that provides appropriate upper division coursework that leads to a minimum of a baccalaureate degree or post-baccalaureate certificate and that addresses the topics listed in the [ARRT® Content Specifications for the Registered Radiologist Assistant Examination](#).

Program Officials: consists of the Program Director, Medical Advisor, didactic faculty, and clinical coordinators.

Sponsoring Institution Officials: officials authorized to sign on behalf of the sponsoring institution.

Institutional Accrediting Agency: post-secondary education accreditation mechanisms or healthcare institution accreditors.

Sponsoring Institution Executive: college Dean/President or equivalent; or the Chief Executive Officer or equivalent of the healthcare organization.

College or Program Catalog: program materials combined into one report, manuscript, or handbook that serves as a resource of information for students.

