

VIRGINIA WESTERN COMMUNITY COLLEGE
RADIOGRAPHY PROGRAM
ESSENTIAL RADIOGRAPHY PROGRAM FUNCTIONS

To successfully complete the clinical component of the Program, the student must be able to perform certain tasks requiring specific physical abilities. The student must be able to perform all of the essential functions of a clinical radiographer listed below or perform with reasonable accommodations.

- Have regular and predictable attendance to meet required performance skills.
- Effectively communicate (verbal, nonverbal, and written) with patients, physicians, peers, and ancillary staff.
- Accurately see and hear to assess slight changes in patient condition such as, but not limited to, changes in breathing, speech, tone of voice, skin color and texture, body movement sounds related to fracture/pathology, pupil dilation, etc.
- Accurately see and hear to receive and interpret various medical equipment signals such as, but not limited to, high and low beeps, alarms, clicks, timers, etc.
- Accurately see (including color differentiation) to observe the patient and read emergency monitor data such as, but not limited to, alarms, lights, numbers, images, wrist bands, etc.
- Work with arms fully extended overhead.
- Demonstrate motor coordination and manual dexterity required to handle and operate equipment such as, but not limited to, wheelchairs, beds, IV pumps, computer keyboards, x-ray tube and table, C-ARM and monitor, open sterile packing, etc. and perform imaging procedures.
- Lift and move 50 pounds at waist level or below waist level.
- Stand in place for extended periods of time (30 minutes to 3 hours).
- Walk rapidly for a prolonged period from one area to another (20-100 feet) carrying up to 25 pounds.
- Emotional Health: demonstrate emotional stability and psychological health in day-to-day interactions with patients, staff, clinical instructors, and others, in routine and non-routine decision-making processes, and on the daily execution of class and clinical assignments.

The Essential Program Functions Form must be signed by the treating physician after hospitalization, surgery, serious illness, or injury before the student can return to the clinical environment.

Student's Name (Print) _____

Physicians Name (Print) _____

Physician Signature _____ Date _____

Program Director _____ Date _____