

Oregon Health & Science University

Radiation Therapy Program

Clinical Instructor Handbook

2024-25 Academic Year



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Introduction

The Radiation Therapy Program at OHSU operates as a free-standing bachelor's degree program within the School of Medicine. The Program provides a 24-month competency-based education consisting of both a didactic and clinical curriculum. The Program has its own established and approved admission and graduation requirements, and has primary responsibility for designing and implementing the education program, procedural guidelines and regulations deemed necessary to carry out the Program's educational objectives.

Upon matriculation into the OHSU Radiation Therapy Program, each student agrees to be bound by the Code of Conduct, rules, policies, procedures and administrative regulations of OHSU, the School of Medicine, Graduate Programs and the Radiation Therapy Program, as they exist at the time of admission, and as they may be changed during the student's continued enrollment. Students must be familiar with the policies and procedures of the Program as delineated in the [student handbook](#), and are also required to familiarize themselves with all policies and procedures of OHSU, the School of Medicine and Graduate Programs.

The OHSU Radiation Therapy Program reserves the right to update any information in the clinical instructor handbook based on policy, curricular, or process revisions at any time during the academic year.

Accreditation

The OHSU Radiation Therapy Program is accredited by the **Joint Review Committee on Education in Radiologic Technology (JRCERT)** and meets the requirements for national board certification. As a graduate of a JRCERT accredited program, students are eligible for national board certification through **The American Registry of Radiologic Technologists (ARRT)**. Upon achieving national ARRT board certification, students are eligible for individual state licensure as required by each distinct state.

JRCERT Contact

The Joint Review Committee on Education in Radiologic Technology

20 North Wacker Drive, Suite 2850

Chicago, Illinois 60606-3182

Phone: 312-704-5300 **Email:** <https://www.jrcert.org/> and/or mail@jrcert.org

Contact Information

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Program office hours are Monday through Friday, 8:00 AM to 5:00 PM (subject to change), not including University holidays. Program offices are located on the fifth floor of the Robertson Life Sciences Building.

[Radiation Therapy Program Website](#)



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Clinical Preceptor and Clinical Staff Expectations

The JRCERT defines student supervisory responsibilities for those involved in student clinical education and instruction. Terms include **clinical preceptor** and **clinical staff** and are defined below:

Position	Responsibilities must, at a minimum, include:
Clinical Preceptor	Maintaining knowledge of program mission and goals;
	Understanding the clinical objectives and clinical evaluation system and evaluating students' clinical competence;
	Providing students with clinical instruction and supervision;
	Participating in the assessment process, as appropriate;
	Maintaining current knowledge of program policies, procedures, and student progress and monitoring and enforcing program policies and procedures.
Clinical Staff	Understanding the clinical competency system;
	Understanding requirements for student supervision;
	Evaluating students' clinical competence, as appropriate;
	Supporting the educational process;
	Maintaining current knowledge of program clinical policies, procedures, and student progress.

The designated **clinical preceptor** is the clinical lead recognized by the JRCERT as the clinical site supervisor. Both the clinical preceptors and clinical staff are considered clinical instructors and are involved in supervision, instruction, student evaluation, and supporting the education process. Expectations for effective clinical instruction include:

- Professional competence, expert knowledge, and demonstrable clinical competence
- Skills in clinical teaching which include effective communication skills and positive interpersonal relationships
- The ability to collaborate with the program and the students in a manner that demonstrates respect, is free of bias and discrimination, is supportive of students and provides equitable accessibility to learning experiences
- Sets guidelines and expectations of the student at the clinical site and regularly checks in with the student to discuss progress
- Communicates with the program regarding student progress

The clinical instructor/student relationship must remain professional at all times, and conversations should consist of appropriate discussion topics. Conversations should be free of profane language, political opinions, bias, and not be derogatory in nature. Spending time with students outside of clinic is highly discouraged.

Clinical Instructor Check List

Clinical instructors are expected to effectively instruct students and complete a series of requirements for each student, each term. Instructors/preceptors will be asked to:



- Provide an introduction to the team and a clinic tour during the first week of the term
- Review term/year specific [clinical objectives](#) and site specific clinical expectations within the first two weeks of the term
- Provide teaching and explanation for treatment equipment, software and treatment techniques
- Supervise students according to programmatic and JRCERT standards
- Approve weekly time logs on www.Trajecsys.com
- Provide access to patient treatment information so students may complete patient logs
- Complete a midterm and final evaluation
- Meet with the student to discuss the midterm/final evaluation prior to the clinical coordinator midterm/final onsite visit
- Meet with the clinical coordinator to discuss student progress during clinical onsite visits
- Reach out to the Program Director (PD) and Clinical Coordinator (CC) if any student related issues arise
- Work with the program, student and clinic to support [Clinical Action Plans](#)
- Submit [competency evaluations](#), regardless of pass/fail for each competency attempt (senior year)
- Work with the program to host students for Fall, Winter, Spring and Summer clinical rotations
- Communicate promptly with the Program Director and Clinical Coordinator if that facility will not be able to host a student

Evaluations and Feedback

Evaluation and feedback are important components of student education. Feedback aids in:

- Identifying areas for improvement
- Motivating students
- Developing learning strategies

Feedback is most effective when it is ongoing, specific and timely. Evaluations occur twice per term, and it is expected that scoring and feedback comments are thoughtful and thorough. See examples of **effective** feedback below:

Category	Comment
Technical: Able to set-up a simple or complex treatment without difficulty	We have seen improvement in technical skills when setting up a breath hold, clinical electron, daily imaging, etc. Great job asking questions and practicing to improve the skills needed for complex treatments. Try to avoid memorizing procedures and relying on your supervising therapists for correction. Also ensure you are comprehending the clinical concept of the procedure you are involved in during treatment.
Technical: Employs proper treatment accessories	Keep double checking the set-up notes before the patient enters the room. Take some time before the treatment schedule begins to look through ARIA and review set-up notes on new patients. Set-up and sim photos will help you be more aware and efficient when setting up the patient.
Interpersonal: Applies concepts from constructive feedback	You are always willing to learn and apply feedback. You have recalled and applied key concepts consistently and we are confident in your skills, clinically.



General Comments	Student is very adaptable and willing to step out from sim to the treatment machines when needed, which is important for developing a team mindset. It is also important to remember that not all tasks are “glamorous” as therapists need to stock linen, cut electron blocks, clean vac lok bags, etc. These are not tasks that are reserved for students, they are tasks that every therapist must do. Understanding the importance of these tasks make for a well-rounded therapist and a good teammate.
General comments	A key differentiator will be employing critical thinking. You have the knowledge and fundamentals. Understanding the “why” behind the process will help with understanding the whole picture. In wanting to be fast you are missing steps along the way. Analyze processes by thinking through key steps after the procedure: <ol style="list-style-type: none"> 1. Why did we set -up the patient up this way? 2. Why did we select the devises we used? 3. What happens if the patient cannot tolerate a standard set-up (such as lying flat)? 4. Why did we choose the specific tattoo placement?

Examples of **ineffective** feedback:

Category	Comment
Technical	No comment
Interpersonal	No Comment
Professional	No Comment
General comments	Student is fun to be around.

Clinical Instructor Policy Guidelines

Student Attendance

Students must adhere to programmatic [clinical attendance policy](#). Per JRCERT requirements, clinical hours are recognized between 5:00 AM- 7:00 PM, Monday-Friday. Students are expected to be in clinic for a full 8 hour day but may not exceed 10 hours in any one day. Students who are asked to leave earlier than 7 hours are required to notify the program of their early release. Clinical supervisors can release students early as they see fit, but should explore any potential learning opportunities for the student so they may fulfil their [clinical education](#) requirements. Attendance is tracked via [Trajecsyst.com](#). Clinical preceptors should approve time weekly and verify accuracy.

There is a no cell phone policy during clinical hours.

Objectives by Term

Objectives by term can be found on [Trajecsyst.com](#) under ‘documents’. It is the student’s responsibility to set a meeting with their clinical instructor during the first two weeks at their clinical site. During the



meeting the student should discuss the objectives for the term, and the clinical instructor may add additional expectations they see fit.

Evaluations

Each clinical rotation has a requirement of two evaluations (a midterm and a final). It is the student's responsibility to request an evaluation prior to their meeting with the clinical coordinator. Meetings are scheduled a week or more in advance and typically occur during week 5 and week 11 of the term. The clinical coordinator will share clinical visit schedules with the clinical supervisors at least a week in advance. The clinical visit will consist of observation on the assigned treatment machine and an oral exam. Space for the clinical coordinator and student to meet will be requested for the oral exam. Evaluations are found on [Trajecsys.com](https://trajecsys.com) and correspond with the year, term and machine/simulation rotation. The Clinical Rotation Policy can be found [here](#).

Patient Logs

Students must complete patient logs during their time in clinic. Through Trajecsys.com, students are expected to log relevant treatment information for each patient they observe. Students are instructed to spend no more than 15-20 minutes per day completing these logs. Spending multiple hours in a day to catch up on patient logs is unacceptable. Students must always comply with HIPAA regulations.

ARRT Required Competencies

The American Registry of Radiologic Technologists (ARRT) didactic and clinical competency requirements are mandatory for graduation and board exam eligibility. The full list and details can be found [here](#).

During senior year, students must complete a minimum of six treatment machine or simulation competencies each term. Consideration is given for low census, but students must be in communication with the clinical coordinator regarding any barriers to completion. Our competency completion policy and process can be found [here](#).

Supervision Requirements

According to the JRCERT, direct supervision assures patient safety and proper educational practices. **All radiation procedures require direct supervision.** The JRCERT defines direct supervision as student supervision by a qualified practitioner (e.g., registered radiation therapist, credentialed medical physicist, licensed radiation oncologist) during all aspects of the procedure. The JRCERT defines direct supervision as student supervision by a qualified practitioner who: is physically present during the conduct of the procedure, and reviews and approves the procedure and/or image. All student work must be checked by a certified radiation therapist, dosimetrist, physicist or physician before treatment is given. Supervision of students over closed-circuit monitor(s) is not acceptable.

Safety

During the first week of clinical placement, students must complete an Emergency Procedure Knowledge Assessment. This helps orient the student to specific environmental safety policies of the department. This is a JRCERT requirement for every student at each clinical site during the orientation period. Students may look to clinical staff for guidance. If a student experiences a needle stick injury



while in clinic the program must be notified and the [Needle Stick Policy](#) will be followed. Radiation badges will be provided by OHSU for each student and must be worn at all times in the clinical areas.

Clinical Instructor Evaluation

At the end of each clinical rotation, students are sent an online Qualtrics survey for evaluation and feedback purposes. The program aggregates this data, ensures anonymity and shares the report with each site supervisor when the program can guarantee anonymity (average 3 years between reports).

About OHSU and the Radiation Therapy Program

- [OHSU Mission, Vision and Core Values](#)
- [OHSU Core Competencies](#)
- [Program Mission and Vision](#)
- [JRCERT Program Goals](#)
- [OHSU Student Learning Outcomes](#)
- [Technical Standards](#)

For successful completion of the course of study for the degree of Bachelor of Science in Radiation Therapy, candidates for graduation must possess the knowledge, skills, attitudes and judgment to function technically and provide patient centered care in clinical situations. Candidates must demonstrate the capacity to develop academic and emotional maturity as well as collaborative skills to function effectively in a radiation oncology team. All students admitted/completing the Program must meet, with or without reasonable accommodation, OHSU core competencies, JRCERT goals, OHSU Student Learning Outcomes (SLO's), and the technical standards linked above. The OHSU SLO's are measured during each assessment cycle with each SLO mapped to an OHSU Core Competency. Data from the assessment plan and report is shared annually with the Radiation Therapy Program Advisory Committee.

Professional Conduct Expectations

Professional Appearance Policy

A clean, neat and professional appearance is required of students in all areas of the hospital and on the OHSU campus at all times. Navy blue scrubs with matching top and bottoms and a visible OHSU badge are required in all clinical settings (clinical rotations and in clinic classes). Professional clean shoes must be worn during clinical rotations.

Grooming guidelines call for clean hands, hair, nails and body. All head and facial hair must be neat, clean, groomed and professional in appearance. Students are required to control body odors, which include excessive perfumes and aftershave lotions that could aggravate patient allergies. The Program also requires the removal of body piercings, except earrings, and the covering up of tattoos to meet professional appearance standards during all clinical rotations. Loop or hanging earrings are not acceptable. Fingernails are to be neatly manicured and of length not to exceed ¼ inch fingertip and decorations should be safe, functional and customary for the work area.



A University Hospital identification badge must be worn at all times on and off campus while engaged in any activity as a student in the Radiation Therapy Program. OHSU ID badges must be visible and securely worn above the waist. Badges hanging from lanyards are not permitted in patient care areas.

Clinical Standards

Clinical information including rotation sites, hours, progress, evaluations and competencies will be managed through Trajecsys: <http://www.trajecs.com>. Students are required to register and create an account for 24 months at the beginning of their clinical rotations in the Fall of junior year. Student Trajecsys accounts must be kept up-to-date at all times. Training will be provided.

The Program requires that all students contact their clinical site before the first day of their rotation to introduce themselves and provide the following information:

- first day at site
- school year
- previous rotational site
- request additional dress code or logistics information

Documentation of this task must be provided to the Clinical Coordinator before the start of the clinical rotation.

Clinical Attendance

Clinical rotation attendance within the approved term schedule is mandatory. However, students are expected to stay home when experiencing illness and to follow OHSU illness policy in regard to returning to clinical and classroom activities.

Excused time off allocation:

- Junior students are allocated two sick days per year
- Senior students are allocated three sick days per year
- Senior students are allotted one excused absence (8 hours) during the final Summer Term to allow for job interviews, if applicable.
- Any unused sick time from junior year may be transferred to the senior academic year

Allotted sick time is to be used for illness unless otherwise preapproved by the Program Director and Clinical Coordinator. Any missed clinical hours due to illness beyond the designated days must be made up by the student. Clinical make up time may not take place during OHSU observed holidays. Students who are excused from a clinical rotation due to illness will submit a written medical note from a physician if the resulting absence is greater than three days. The student's total number of absences, regardless of cause, will be reviewed by the Clinical Coordinator and Program Director. Each student will provide a log of attendance via Trajecsys. The log will be reviewed by the Clinical Coordinator on an ongoing basis.

The Clinical Coordinator and Clinical Instructor must be notified by e-mail before on-duty shift time when illness or other circumstances prevent the student from reporting to the hospital.



- Failure to e-mail or call the Clinical Coordinator and Clinical Instructor will result in a warning.
- A second failure to call in to the Clinical Coordinator and Clinical Instructor will result in a second warning.
- A third failure to call the Clinical Coordinator and Clinical Instructor will result in dismissal.
- On days where clinic and class coincide, a reasonable drive time will be allotted.

Clinical Time Records

All students must have location tracking activated for all Trajecsys clock in/out. Any time entries that do not follow the process below will be considered unexcused absences. Unexcused clinical absences are a cause for grade reduction, course failure, and/or professional probation. Falsified clinical time, falsified communication or providing false reasons for absences or tardiness is a serious policy violation and cause for immediate disciplinary action and dismissal from the program.

Clinical Time Exceptions in Trajecsys:

- Should be rare
- Used to document all absences
- Used when a clock in/out has been missed

Process For Missed Clock in/out:

- Student must email the clinical coordinator, cc. Program Director and relevant clinical instructor
- Email must state the forgotten instance and the specific date and time that has been corrected
 - Example email: On 9/19/2024 I entered a time exception for my clock in of 8:03 AM.
- Time exception note in Trajecsys must include appropriate details
 - Example note in Trajecsys: Forgot to clock in, emailed Maria and (name) Preceptor.



Clinical Schedule

Below are sample clinic schedules. Junior students attend clinic two days per week on Mondays and Wednesdays. Senior students attend clinic three days per week on Tuesdays, Thursdays, and Fridays. Didactic courses take place on non-clinic weekdays.

Juniors

Week	Monday	Tuesday	Wednesday	Thursday	Friday
1-11	Clinic	Classes	Clinic	Classes	Classes
12	Finals Week - No Clinic				

Seniors

Week	Monday	Tuesday	Wednesday	Thursday	Friday
1-11	Classes	Clinic	Classes	Clinic	Clinic
12	Finals Week - No Clinic				

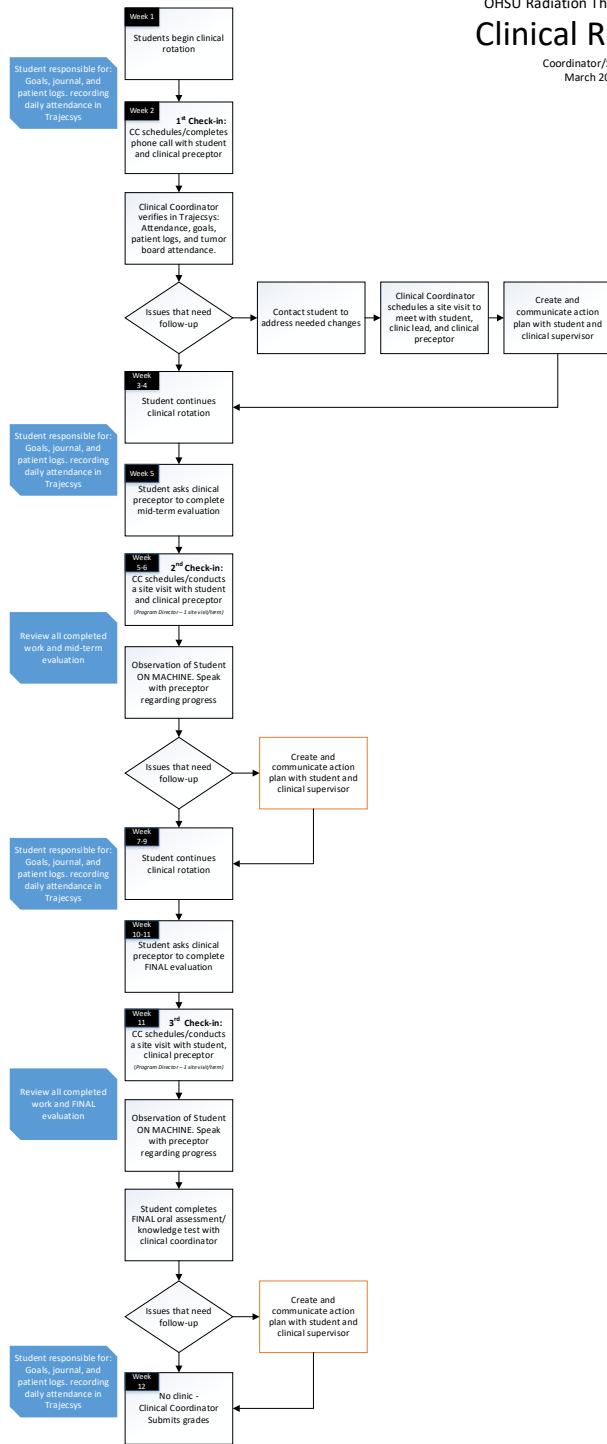
*Summer term is four full days of clinic, one day of classes, for all students.



Clinical Processes and Policies

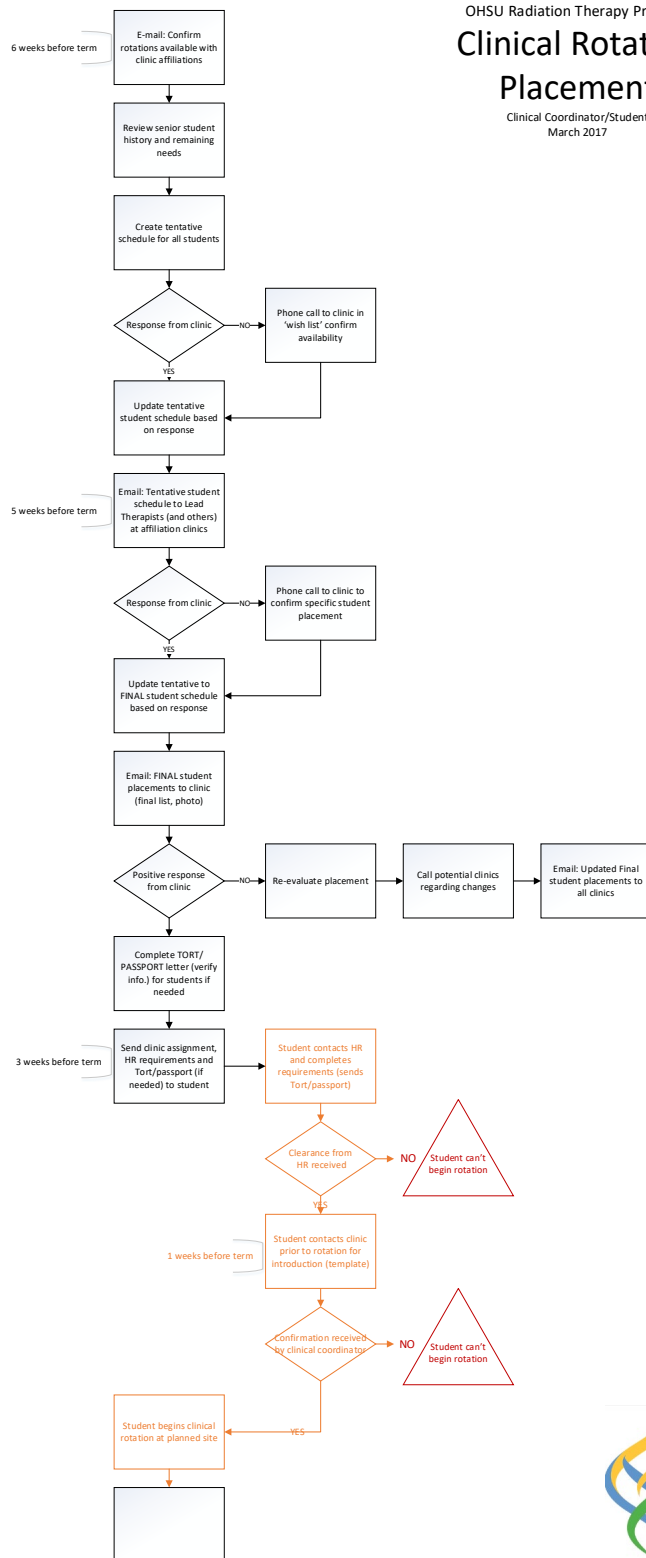
Clinical Rotation

OHSU Radiation Therapy Program Clinical Rotation Coordinator/Student March 2017



Clinical Rotation Placement

OHSU Radiation Therapy Program
Clinical Rotation Placement
 Clinical Coordinator/Student
 March 2017



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www.ohsu.edu/radiation_therapy

Clinical Education

The responsibility of the radiation therapist continues to become more complex as the technology becomes more sophisticated. The clinical education portion of the program affords the student the opportunity to perform a variety of procedures under the supervision of an ARRT certified radiation therapist, dosimetrist, physicist or physician in the radiation oncology department.

The student therapist must have mastered an acceptable level of competency within the academic portion of the curriculum before applying this knowledge within the clinical setting.

- The student begins clinical participation by first observing a registered radiation therapist.
- Participation moves from the passive mode of observation to the more active mode of assisting the therapist in the therapy procedures.

The rate of student progress is dependent upon the ability of the student to use the equipment and to comprehend and perform the various tasks assigned.

- As soon as the student feels confident with the equipment and procedure, they may perform the procedure under the direction of the therapist. The therapist will direct, guide and instruct the student during the procedure
- As the student gains experience in the various procedures, independent clinical performance under supervision is introduced. The procedure will be supervised and the therapist will direct and/or intervene as needed.
- In their senior year, after the student has independently completed the individual procedure and feels confident to challenge a competency evaluation, the student follows the [competency procedure](#).
- After completing the competency procedure, the student continues to perform the procedure to retain proficiency and develop additional self-confidence.
- Competency requirements for clinic and clinic seminar must be completed prior to graduation.

In addition to completing the clinical competencies throughout the year, students must keep clinical logs of all patients/sites treated, tumor board logs and a reflective journal.

The student is expected to use clinic time wisely. When not performing direct clinical duties, the student should consider the following activities:

- Practice calculations
- Practice reading treatment charts
- Practice checking charts
- Review textbooks available in the department
- Work on homework
- Review medical journals
- Practice simulations or treatment set-ups
- Work on treatment machines when assigned to a slow CT/Simulation rotation

No magazines, newspapers or outside reading are allowed in the clinical area. Social visiting during clinic hours should be kept to a minimum. **NO PHONE USE DURING CLINIC HOURS.**



Professional Clinic Conduct

OHSU students are expected to conduct themselves in accordance with the high ethical standards expected of health professionals. It is expected that health professionals will treat patients and their families with dignity and respect, and will hold the information that they acquire in strictest confidence. The University and Radiation Therapy Program has the right to sever, at any time, the connection with any student considered unfit for a career in the health-related professions.

Patient information is to be discussed only in the context of consultation with clinical instructors or professional discussion with other health care providers at the clinical site. Students will delete or code identifying information during oral presentations to the program faculty and students and on any write-ups submitted for faculty evaluation. Protected patient information shall not be input into Trajecsys.

Adherence to HIPAA must always be strictly followed. Faculty and students will not allow personal concerns and biases to interfere with the welfare of their patients.

Conversations inside the treatment rooms should be limited to treatment set up. **PERSONAL CONVERSATIONS, OUT OF COMMON COURTESY, SHOULD ALWAYS INCLUDE THE PATIENT.** Students are expected to use a professional demeanor when interacting with patients. A patient should be addressed as Mr. or Mrs., etc., unless the patient has requested first name usage. Professional behavior includes using professional terminology when communicating with the patient and family. When working with patients, please, always remember to be gentle, physically and verbally.

It is expected all students will attend clinic without impairment. Impairment can be defined as but not limited to:

- Experiencing the effects of substance use, including alcohol or other drugs (legal or illegal)
- Experiencing the disruption to body circadian rhythm caused by shiftwork.
- Experiencing personal crisis.
- Experiencing shock or insecurity after a personal incident, fire, or robbery.

Students experiencing any form of impairment should contact the Program Director for a safety evaluation and guidance. Each situation should be assessed on a case by case basis.

Clinical Expectations

- Prompt arrival time.
- Appropriate dress.
- Proper conduct in the work environment free from bias and discrimination, with patients and other personnel.
- Be responsive to instruction, evaluations and constructive criticism.
- Learn, follow and practice department routines and policies.
- Be aware of and responsive to patient condition and care.
- Demonstrate appropriate radiation safety practices.
- Adhere to equipment safety requirements.
- No cell phone use while working.



Competencies

Didactic and clinical competency requirements for radiation therapy established by the American Registry of Radiologic Technologists (ARRT) can be found here: [ARRT Primary Certification and Registration Didactic and Clinical Competency Requirements for Radiation Therapy](#)

Requirements include:

- [General patient care procedures \(7\)](#)
- [Quality Control Procedures \(3\)](#)
- [Simulation \(7\)](#)
- [Dosimetry \(6\)](#)
- [Treatment Accessory Devices \(4\)](#)
- [Participatory Procedures \(3\)](#)
- [Radiation Treatment Procedures \(18\)](#)

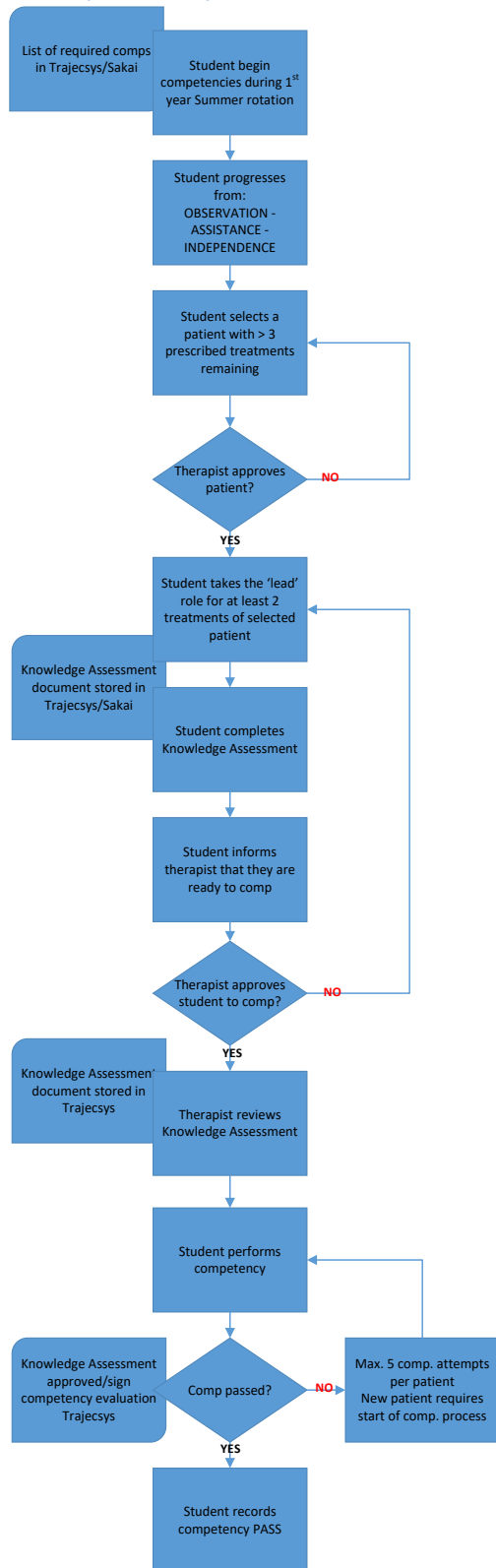
Some individual competencies are difficult to acquire, and students should be aware and take the opportunity to be evaluated whenever possible. Competency completion policy states:

- A knowledge assessment must be submitted and approved for each competency. Competencies without a knowledge assessment may be deemed invalid.
- Competencies can be completed from Summer term 1st year until Summer term 2nd year/graduation.
- The **minimum** competency requirement must be met each rotation or the clinic grade may be reduced by one grade.
 - There is no **minimum** for Summer term 1st year, as this is considered an orientation period.
 - **Minimum** six machine competencies must be performed Fall- Summer terms during the 2nd year.
- The **maximum** competency requirement must not be exceeded during any one clinical rotation to ensure a diverse clinical competency experience.
 - The **maximum** is six Treatment Room Procedures or six Simulation competencies for Summer term 1st year, unless otherwise approved by the program, as this is considered an orientation period.
 - A **maximum** of 10 Treatment Room Procedure/ Simulation competencies is allotted for Fall-Summer terms during the 2nd year, unless otherwise approved by the program.
- ARRT competency requirements not included in the Radiation Treatment Procedure or Simulation categories are **not** included in the minimum/maximum totals as they require less preparation and may be difficult to acquire reliably at each clinical site.
- Two Treatment Room Procedure competencies may be simulated in the clinic with a therapist.
- All CT/Simulation competencies must be performed on patients during planned sim rotations.
- All clinical competencies must be completed and passed by the time of graduation.
- **All competencies regardless if passed or failed must be submitted in Trajecsys by the clinical supervising therapist on the day attempted.**

Missing competencies will require additional days beyond graduation, and will be arranged by the clinical coordinator. Students that do not perform the minimum competencies each term may be placed on probation and graduation may be delayed.



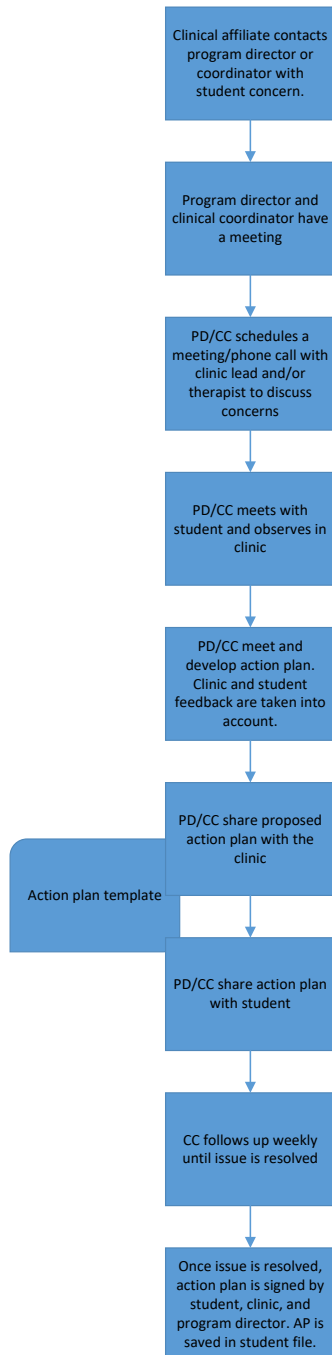
Competency Evaluation Process



Clinical Action Plans

A clinical supervising therapist may notify the program at any time regarding student technical, professional, or interpersonal concerns. After a meeting with the clinical supervising therapist and the Program Director (PD)/Clinical Coordinator (CC), a clinical action plan will be discussed with the student. Clinical action plans remain in place until issues are resolved.

Clinical Action Plan Process



Clinic Warm-up

During all treatment machine rotations, students must come in for one week to participate in equipment warm up on their clinical days. On student warm-up days, they may be excused early. Students will not warm up on class days.

Term Completion

Evaluations, competency progress and Trajecsys logs are due to the Clinical Coordinator at the end of each clinical rotation. The following data is reviewed at each visit by the Clinical Coordinator:

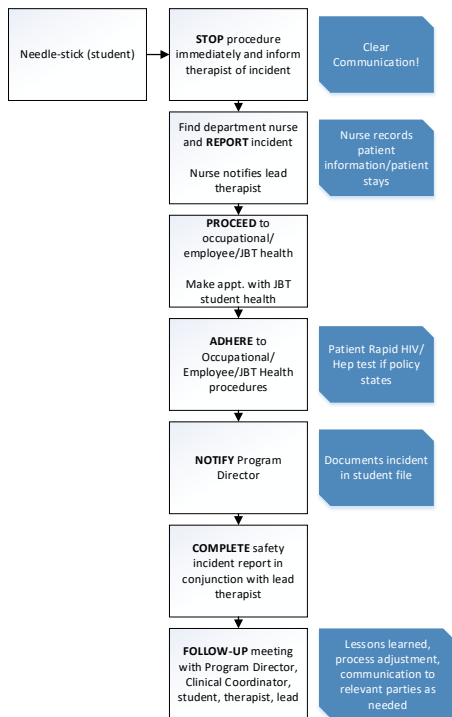
- Clinical evaluation - a late evaluation will result in grade devaluation
- Clinical competency progress
- Patient/site log
- Tumor board log
- The mid-rotation evaluation is due in the **5th week** of clinical rotation
- Trajecsys logs
- Reflective journal

Radiation Badges

Radiation badges will be provided by OHSU for each student and must be worn at all times in the clinical areas.

Needle Stick Injury

Students must adhere to the following process related to a needle-stick injury. Student safety is the utmost priority of the Radiation Therapy Program.



Temporary License

A student or recent graduate—without a registry credential—of an approved Radiation Therapy school may apply for a temporary license to practice in their modality within 5 months of graduation, under indirect supervision of a licensed physician or a technologist licensed in the same modality as the temporary licensee. The Program Director, and relevant Clinic Supervisor must sign the temporary license. The Clinic Supervisor must be physically present in the building and available to assist the temporary licensee. A temporary license is valid for six months and may be renewed for one additional six-month period (for a total of 12 months.) With an endorsement from the school, a student may begin to practice with a temporary license as early as five months prior to the student’s course completion date.

Work Stoppage and Strike Activities

The clinical education portion of the program shall provide a continuous environment for direct and/or indirect supervised competency based clinical education and experience. Clinical sites shall not substitute students for paid personnel to conduct functions of the clinical site during a work stoppage or at any other time.

The following contingency plans are developed by the Program Director and will be in effect within 8 hours when a work stoppage or strike is declared:

- Students assigned to clinical sites declaring a work stoppage or strike will be placed at another clinical site within 8 hours of declaration.
- Student evaluations and competencies will continue.
- When work stoppage/strike has ended, students will return to original assigned clinical site.
- The Clinical Coordinator will contact Clinical Supervisor at the clinical site for students' transfer.

Clinical Affiliation

Affiliation Process

Clinical affiliation is integral to the continual education and training of OHSU radiation therapy students. Affiliation agreements are entered by both the facility and the OHSU Radiation Therapy Program upon application approval by the JRCERT. The JRCERT application requires:

1. Clinical site name and address
2. Number of accelerators and CT/Simulation
3. Resume of CV of the Lead Therapist
4. Proof of license for machine, ACR accreditation or something similar

OHSU requires an OHSU Affiliation Contract and the application cost of \$250 is covered by the Program.

Clinical Sites

OHSU CLINICAL SITES	OHSU Department of Radiation Medicine
	OHSU Beaverton Radiation Oncology
OHSU PARTNER SITES	OHSU Hillsboro Cancer Center
	Adventist Health Radiation Oncology
	Bay Area Hospital, Coos Bay
	Asante Rogue Regional Cancer Services, Medford



AFFILIATED CLINICAL SITES	Compass Oncology RQ, Compass Oncology West, Compass Oncology Vancouver
	Community Cancer Center, Roseburg
	Legacy Mt. Hood, Legacy Good Samaritan
	Kaiser Interstate Radiation Oncology
	Peace Health SW Washington
	Providence Portland, Providence St. Vincent, Providence Clackamas, Providence Medford, Providence Alaska
	Salem Health Radiation Oncology
	Samaritan Health Radiation Oncology, Corvallis
	Sky Lakes Cancer Center, Klamath Falls
	St. Charles Cancer Center, Bend

Quick Links

[ARRT Competency Requirements](#)

[ASRT Radiation Therapy Curriculum](#)

[JRCERT](#)

[OHSU Radiation Therapy Program](#)

[OHSU Radiation Therapy Program Student Handbook](#)

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The OHSU Radiation Therapy Program reserves the right to update any information in the clinical instructor handbook based on policy, process, or curricular revisions at any time during the academic year. The handbook will be distributed at the beginning of each term, with the expectation that each clinical instructor has access to an electronic copy.

The OHSU Radiation Therapy Program has a profound appreciation for each of our clinical sites and clinical instructors as the program and student training could not be possible without each of you. We look forward to continued collaboration!



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