

Zane State College
RADT Program
Clinical Observation Documentation

Clinical Observation Site #1 _____

Date _____ Start time _____ End time _____

CI Signature _____

Clinical Observation Site #2 _____

Date _____ Start time _____ End time _____

CI Signature _____

Clinical Observation Site #3 _____

Date _____ Start time _____ End time _____

CI Signature _____

Total observation time completed _____

Please read the questions in this packet and use them as a guide to observe the radiologic technologists as they perform their duties. After observing and talking with the staff, students, and Clinical Instructor, please answer all the questions as completely as possible for each clinical site. You do not need to write a book, however your answers should be more substantial than just a few words. Once you have completed answering the questions please place this documentation sheet in your application packet. **It is the student's responsibility to keep this packet throughout the observation process and bring it to each observation visit.

Student Signature _____

Student Name (please print) _____

