



Supervision Level	General Student Characteristics	Communication	Technical Aspects	Patient Care	Patient Assessment, Image Critique & Clinical Decision Making & Reasoning	Interpretation	Departmental Procedures/ Policies
-------------------	---------------------------------	---------------	-------------------	--------------	---	----------------	-----------------------------------

<p>4th Year (First Half)</p> <p>Course: Medical Imaging Clinical Practice 4 and Medical Imaging Honours Clinical Practice 4 Autonomous Student</p>	<p>Collaborative Supervision characteristics Tailoring style of supervision to what the student already knows. Immediate feedback still encouraged. Able to withdraw slightly behind the control panel for supervision. Instructions are able to be more complex. Still assessing suitability of patients/clients for the student's level of comfort with the procedure/examination. At this stage the student is encouraged to be actively involved in this process. Supervisor still prioritising student's workload though at this stage the student is encouraged to take a greater role in this process. As the course progresses the supervision moves to a little more remote though still within 'geographical area' of the examination room.</p>	<p>The student would be expected to attempt all examinations/procedures with increasing complexity and challenges. The student is able to structure their examination in a logical sequence, though they may require assistance at times with this task.</p>	<p>Improved patient interaction. More eye contact and personalised instructions for the patient. Able to answer basic patient questions. Provide information at a basic level to patients.</p>	<p>Integrating knowledge of previous cases with academic knowledge. Confidence increasing with exposure selection. Able to adjust exposures with greater accuracy for pathologies and patient conditions. Coping with more than one demand at a time and beginning to prioritise (with supervisor input) their work demands. Anticipates potential problems so mistakes are fewer. Aware of patient advocacy issues associated with radiographic examinations. Time for examinations is decreasing.</p>	<p>Improved patient interaction. More eye contact and personalised instructions for the patient. Able to manage more complex patient presentations and auxiliary equipment. Able to anticipate patient care issues associated with radiographic examinations and procedures. Beginning to develop a patient-centred approach to their examinations.</p>	<p>Integrating knowledge of previous cases with academic knowledge. Clinical history taking skills improving and able to anticipate basic alterations to technique as a result of information gained. Making suggestions of adaptations to technique required for more straightforward examinations. Still requiring assistance for more complex situations.</p>	<p>Critiquing all images and identifying abnormalities where appropriate. Gaining confidence in naming of abnormalities and pathologies and the use of medical terminology.</p>	<p>Greater level of comfort in the clinical department and remote or unusual locations. Understand the role of the radiographer in the multidisciplinary team.</p>
---	---	--	--	---	---	--	---	--