



Computed Tomography Program Application Packet 2023 Entrance

**Application Deadline:
March 1, 2023**

Applications will be submitted online at [Radiologic - Academics \(yvcc.edu\)](https://yvcc.edu/radiologic-academics)

LATE APPLICANTS CONSIDERED IF SPACE IS AVAILABLE WITHIN PROGRAM.

Location:

Yakima Valley College

Lyon Hall, Room 190

Telephone: 509.574.4532

TDD: 509.574.4600

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Letter to the Applicant

Dear CT Applicant,

Thank you for your interest in our 2-quarter Computed Tomography Certificate Program. This program is an extension of training for students who have graduated from an accredited Radiologic Sciences program, and are certified in Radiography by ARRT by September 1 of the year applying.

In this packet, you will find information about the application, selection process, and the course layout for both academics and clinical practicum. The course is sequenced to begin Fall quarter, and complete Winter quarter, though academic quarters may be taken out of sequence, or singularly, with program permission.

The academic classes are taught 100% online. It is recommended that you have easy access to a computer with internet.

If you have any questions, do not hesitate to contact the faculty or program assistant. We appreciate your interest in our program and look forward to working with you.

Sincerely,
Michele Coville

Faculty: Located in Lyon Hall – YVC Campus

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The Program

Goals

The program will provide the didactic curriculum to prepare students to pass the ARRT (American Registry of Radiologic Technologists) examination in Computed Tomography.

Graduates will demonstrate clinical competency in 125 clinical exams in CT. Graduates will demonstrate critical thinking, problem solving and communication skills appropriate to the field.

Curriculum

Table 1: Fall Quarter

Course	Course Name	Course Hours
RT 270	CT Physics & QA	4 certificate credit hours
RT 272	Cross Sectional Anatomy & Pathophysiology 1 (<i>Thorax, Abdomen, Pelvis</i>)	2 certificate credit hours
RT 273	CT Clinical Practicum I (<i>3 days per week= 210 hrs. approximately</i>)	7 certificate credit hours

Table 2: Winter Quarter

Course	Course Name	Course Hours
RT 276	<i>Cross Sectional Anatomy & Pathophysiology II (Head, Neck, CNS, Musculoskeletal)</i>	4 certificate credit hours
RT 278	<i>CT Special Procedures</i>	2 certificate credit hours
RT 279	<i>CT Clinical Practicum II (3 days per week = 210 hrs. approximately)</i>	7 certificate credit hours

Total: 26 Certificate Credit Hours

Academic classes will be delivered online. Specifics will be identified in individual course syllabi. Clinical Practicum will be scheduled day shift hours at the affiliate CT Scan departments unless otherwise approved by the Program Director. Course scheduling may change to meet program needs.

Clinical Practicum

Clinical competencies are a program requirement. Students will be assigned to a single CT location for the majority, if not all, of their clinical practicum. Rotations to a second location may be required to obtain the required ARRT competencies and round out the student's CT experience. This will be assessed on an individual basis if the need arises. The goal is to provide students with the opportunity to obtain CT scanning experience, as well as include the necessary competencies required for ARRT CT Registry. Clinical education centers currently associated with the CT Certificate Program at Yakima Valley College include:

- Astria Sunnyside Hospital – Sunnyside, WA
- Yakima Valley Memorial Hospital – Yakima, WA
- Valley Imaging Partners – Yakima, WA
- Confluence Health-Wenatchee, WA
- University of Washington Medical Center – Seattle, WA

Please understand that due to the limited number of CT Scanners, clinical practicum may be assigned to any of the above locations.

Students will be enrolled for clinical experience two quarters, approximately 3 days per week during day shift. Some clinic sites may offer alternative hours, please ask the Program Director for details.

For the CT Program student who has the opportunity to obtain the ARRT required CT competencies necessary for the Registry exam, clinical practicum may be waived. Please contact the Program Director for further information.

Students are expected to adhere to clinical educational facilities' policies and procedures. These policies and procedures are located in the RT office.

Technical Standards

A CT Technologist must be capable of communicating with and maneuvering patients, reacting to emergency situations, manipulating heavy equipment and handling radiographic accessories; therefore, he/she must have adequate use of speech, limbs and auditory as well as visual senses. The following is a list of essential functions that must be performed in a satisfactory manner.

- Apply knowledge of anatomy, physiology, positioning and scan parameters to accurately demonstrate anatomical structure within a CT image.
- Determine exposure factors to achieve optimal image exposure with minimum radiation exposure to the patient.
- Monitor medical equipment attached to patient.
- Assist physician and technologists with sterile field and administration of contrast media.
- Provide patient care and appropriate patient communication.
- Recognize emergency patient conditions and initiate lifesaving first aid and basic life support procedures.
- Evaluate the performance of CT systems, know safe limits of equipment operations and report malfunctions to the proper authorities.
- Participate in CT quality assurance programs.
- Understand and review medical records/patient chart when appropriate.
- Adhere to standard precaution protocols and maintain cleanliness of equipment.
- Adhere to appropriate procedures including: airborne, droplet, contact or reverse isolation.
- Have the ability to understand, remember, and apply oral and/or written instructions in English.
- Understands complex problems and collaborates and explores alternative solutions.
- Hear faint sounds from a distance of 15 ft. away
- Have correctable far vision in one eye to 20/20 and 20/40 in the other eye.
- Lift 20 pounds from the floor, carry 10 ft. and place on a surface 36 in. high.
- Participate in frequent lifting and carry up to 50 lbs.
- Push/pull 1 to 20 lbs. of force continuously and 20-50 lbs. force occasionally.
- Work with arms overhead for 2-5 minutes at a time.
- Sitting, standing and walking for long periods of time.
- Have the ability to feel, reach, grasp and perform repetitive motions.
- Safely and successfully manipulate and transport mobile radiographic equipment.
- Endure observing and working, hands-on, with severely injured trauma patients and/or critically ill patients.
- Assist in radiography of a corpse.
- Communicate effectively with patients and staff.
- Adhere to all HIPAA Regulations

Motor Skills

Students should have sufficient motor function so that they are able to safely and substantially perform the essential requirements needed to provide general care and treatment to patients in all healthcare settings. For example; for the safety and protection of patients, the student must be able to perform basic life support, including CPR, and function in an emergency situation. The student must have the ability to safely assist a patient in moving from a chair to a bed, examination table or from a wheelchair to another location.

Sensory Observation

Students must be able to observe a patient accurately, at a distance and close at hand, and observe and interpret non-verbal communication.

Communication

Students must communicate effectively and sensitively with other students, faculty, staff, patients, family and other professionals. He/she must be able to express their ideas and feelings clearly and demonstrate a willingness and ability to give and receive feedback. The student must be able to convey or exchange information at a level that allows development of a health history, identify problems presented, explain alternate solutions, and give directions orally and in writing. The student must have the ability to make correct judgement in seeking supervision and consultation in a timely manner.

Cognitive

Students must be able to measure, reason, analyze, integrate and synthesize in the context of their professional study. They must be able to quickly read and comprehend extensive written material, as well as evaluate and apply information and engage in critical thinking.

Behavior/Emotional

Students must possess the emotional health required for the exercise of good judgement, the prompt completion of all responsibilities attendant to the care of patients and their families. In addition, they must be able to maintain mature, sensitive and effective relationships with patients, students, faculty, staff and other professionals under all circumstances including highly stressful situations. The student must have the emotional stability to function effectively under stress and to adapt to an environment that may change rapidly, without warning, or in unpredictable ways. The student must be willing to change his or her behavior when it interferes with productive individual or team relationships. The student must possess skills necessary for effective and harmonious relationships in diverse environments.

Professional Conduct

Students must have the ability to reason morally and practice healthcare in an ethical manner. They must be willing to abide by professional standards of practice. Students must be able to engage in patient care delivery in all settings and be able to deliver care in all populations. Students must demonstrate professional behavior and attitudes, such as the ability to collaborate with others, and to admit mistakes gracefully.

If an applicant is unable to perform the essential functions of a CT technologist, requests for reasonable accommodations may be discussed with Disabled Student Services and the Program Director.

Estimated Cost of Program

	Fall Quarter	Winter Quarter
Tuition*	\$1494.88 (for 13 credits)	\$1494.88 (for 13 credits)
Books/Supplies (estimate)	\$300.00	\$0.00
Non-Refundable Fee**	\$40.00	\$0.00
Mal Practice Insurance	\$15.00	\$0.00
Liability Insurance	\$3.00	\$0.00
ARRT Certificate Fee		\$225.00
Background & Drug Screen	\$88.00	\$0.00
CPR	\$50.00	\$0.00
E-Learning Fees	Incl.	Incl.
Total:	\$1,990.88	\$1,719.88

Approximate cost of the 2 quarter program: \$3,710.76
Possibility of an increase in tuition; unknown at time of printing.

***Tuition & Fees**

'Tuition' & 'Fees' amounts are based upon current rates at time of print and are subject to change.

****Non-Refundable Fee**

This non-refundable fee covers necessary items required for the CT Program, and must be paid within two (2) weeks of acceptance.

This program is ineligible for financial aid. YVC Foundation Scholarship applications can be found using the following link: [Grants and Scholarships - Financial Aid \(yvcc.edu\)](https://ybcc.edu/grants-and-scholarships-financial-aid).

Foundation scholarship applications are available each year beginning the first day of winter quarter and are due the second week of March each year.

Admission Requirements

Application Requirements

- ARRT certified in radiology prior to September 1 of the year applying.
- 3.2 minimum college level GPA (only the college level GPA at the end of winter quarter will be considered for students currently enrolled in classes).
- In good standing with ARRT credentials if currently ARRT registered.

Academic courses will be assigned in the order applications are received until class capacity is full as long as applicant requirements are met.

Clinic assignments are reserved for students enrolled in all academic courses. Due to the limited number of clinic sites available, placement in clinical practicum will be based on points earned for the following criteria as long as all other applicant requirements are met AND as long as clinic spots are available:

- ARRT certified radiography prior to March 1st of the year applying.
- Letter of recommendation that outlines “strengths of the applicant as a student radiographer or employed radiographer and discusses why they should be chosen for clinic site placement”. ***This letter is not to be acquired from faculty.***
- College level GPA at the end of winter quarter.

** If more applications are received than there are spots available for clinical practicum or academic courses, students will be placed on a waitlist in case a spot opens up. The waitlist will remain active until September 1. **

Please send all **non-YVC** official transcripts to: admission@yvcc.edu . It is the student’s responsibility to ensure official transcripts arrive, if you are not a current YVC student. Please contact admissions if you have questions about transcripts arriving. If you are not a current YVC student, please attach your unofficial transcripts to the application at the time of applying.

Notification of selection will be completed by April 30.

General Information

Complete Disclosure of Academic Performance

By law, education records, which contain information directly related to a student and maintained by an educational agency or institution can be shared with other school officials who have legitimate educational interests. You will need to give written permission for a Complete Disclosure of Academic Performance to YVC prior to entry into the CT Program.

Health Insurance

Each student participating in the clinical education program is strongly encouraged to acquire comprehensive health and accident insurance that will provide continuous coverage during his or her tenure in the program. Students are responsible for their own health care costs, health insurance coverage, and their own health needs, including illness or injuries which might occur in the clinical setting.

Immunization Requirements

Students who are accepted to the CT Program must supply official documentation of their immunization status prior to entering the CT Program. Immunization status is coordinated through the YVC Radiologic Sciences Office. If a student's immunization record is incomplete, the student may be required to obtain immunizations or proof of immunity at their own expense. If immunizations expire, or new requirements are added while a student is enrolled in the program, it is the student's responsibility to update immunizations at their own expense and provide the necessary documentation reflecting current immunization status.

IF IMMUNIZATION STATUS IS NOT CURRENT, THE STUDENT WILL NOT BE ALLOWED TO PARTICIPATE IN THE CLINICAL COURSES.

Current Immunization Requirements

- **TDAP** within the past 8 years.
- **Measles, mumps, rubella injection (MMR).** Documentation of 2 doses of MMR vaccine or record of laboratory serology (titers) results. You cannot be pregnant and must not become pregnant for the next month if receiving MMR shots, since these are live vaccines. You may be breast feeding. Please check with your physician.
- **Hepatitis B Vaccine (HepB)** consists of a series of three injections; the second injection is given one month after the first injection and the third injection is given six months after the first.
- **PPD Testing:** RT students are required to have a two-series PPD to establish a baseline. The second PPD is administered in 1-3 weeks after the first, unless they have had a negative PPD the two previous years then only a single PPD test is required. After the 2 step PPD, single dose PPD's are required annually. Quantiferon test is also acceptable. A positive PPD test requires the results of a negative chest x-ray and a screening form that documents no tuberculosis symptoms since their last Chest X-ray (see Program Director). **DO NOT get this testing done prior to entering the program. There will be specific dates in which you will need to receive this.**
- **Varicella.** Provide proof of inoculation series (2 shots) or positive serology (titer).
- **H1N1 Influenza** required annually.
- **COVID-19** two-part for Pfizer or Moderna, one-part for Johnson & Johnson
- **Hepatitis A Vaccine (HepA): This is optional; however, it is highly recommended** due to the large amount of Hepatitis A infections in Washington State. Single vaccine within the last 8 years or proof of two life-time doses.

It is the student's responsibility to ensure compliance with these immunization requirements.

Cardiopulmonary Resuscitation (CPR)

Prior to entering the program, all students are required to obtain CPR certification. The certification must cover One-person and Two-person Adult CPR and Obstructed Airway Management, Child and Infant CPR, Obstructed Airway Management

AED for health care professionals. STUDENTS WILL NOT BE ALLOWED TO PARTICIPATE IN CLINICAL COURSES UNLESS CPR CERTIFICATION AND IMMUNIZATION INFORMATION IS CURRENT.

Drug Screen and Criminal Background History

All accepted students must complete the Verified Credentials Criminal History Background Check and 10 panel drug screen. Satisfactory clearance is required prior to clinical practicum placement. (This is required for clinical practicum only). Information regarding the testing company and procedure will be given to students prior to students beginning clinical practicum. Results must be received in the Radiologic Sciences office by the time specified in your acceptance notification. Results that are positive in nature may prevent clinical practicum. Each student is responsible for costs incurred (estimated cost \$88.00).

Transportation

Students are responsible for their own transportation and for complying with parking regulations on campus and in the assigned clinical agencies. The Radiologic Sciences Department will attempt to schedule classroom and clinical sites as close to the main campus as possible. However, some distant clinic sites within our community college district are utilized. Clinical practicum schedules will not be adjusted for transportation problems that might arise.

Disabled Student Services

The CT Program, as part of YVC, is committed to the principle of equal opportunity. The program does not discriminate on the basis of race, color, creed, religion, national origin, gender, sexual orientation, age, marital status, disability, disabled veteran or Vietnam era veteran status. When requested, and within appropriate documentation, the program will provide reasonable accommodation to otherwise qualified students with disabilities. Students who need adaptations or accommodations because of a disability, emergency medical condition, or need special arrangements in case a building must be evacuated, should notify the Program Director and the instructor of their choice. More information is available through Disabled Student Services at 574-4961.

Occupational Hazards

Occupational hazards for the field of radiology may include, but are not limited to: exposure to infectious diseases such as AIDS or hepatitis, exposure to hazardous chemicals or substances, accidental injury, neuromuscular problems, exposure to blood borne pathogens, exposure to radiation and allergic reactions to latex, anesthetic agents, or other chemical agents.

Students accepted in to the CT Program will be required to sign an “Informed Acknowledgement of and Consent to Hazards and Risks Form”. Questions may be directed to the Program Director.

Clinical Facility Training

Students must complete facility education modules as required. These will be provided in the clinic manual prior to beginning clinic hours and will be further discussed on class syllabi.

Warning and Notification of Hazards & Risks

All occupations have inherent risks that prospective students should be aware of. The purpose of this Warning and Notification of Hazards & Risks is to bring students’ attention to the existence of potential dangers in Radiologic Technology, and to aid them in making an informed decision concerning participation in the YVC CT Program, and in signing the Informed Acknowledgement of and Consent to Hazards and Risks Form.

Occupational hazards for the field of radiology include, but are not limited to:

- exposure to infectious disease which may lead to side effects or death
- exposure to hazardous chemicals or substances
- accidental injury or death in the clinic setting or in route to or from a clinical site
- injury or illness that can affect one’s personal health or the health of an unborn child
- exposure to radiation that may negatively affect one’s health or the health of an unborn child

An injury or illness can impair one's general physical and/or mental health and may hinder one's future ability to earn a living, engage in business, social, or recreational activities, or generally impair one's ability to enjoy life. There may also be risk of injury, illness, or death resulting from causes not specified in the Warning and Notification of Hazards & Risks.

In addition to acknowledging hazards and risks, the applicant must take responsibility regarding matters of safety involving self and others. After receiving instruction, students will be expected to demonstrate safety practices designed for radiology. Students must inform appropriate faculty of any relevant personal medical condition which might be hazardous or risky to self or others. A student may be required to submit permission from his/her personal physician to participate in radiology education activities.

You will be required to sign the Informed Acknowledgement and Consent to Hazards & Risks Form at the time of applying to the program.

Application Checklist

The following will be completed during the online application submission:

- CT Application Form
- Copy of ARRT Card (If student has not graduated a Radiologic Sciences program, this must be provided by Sept. 1st)
- Informed Acknowledgement of and Consent to Hazards & Risks
- Criminal History and Drug Screen Notification Form (Only if applying for Clinical Practicum at YVC)
- Applicant Disclosure
- Disclosure of Academic Performance & Permission for Release of Information
- Personal Data Form
- Letter of Recommendation (Only if applying for Clinical Practicum at YVC)
- Transcripts:
 - Unofficial – Turned in with application (required if you are not currently a YVC student)
 - Official – Only if **you are not currently attending YVC**.

Have 1 official transcript sent electronically to: admission@yvcc.edu

Applicants, if not currently attending YVC, MUST submit an "Admissions Application" to Yakima Valley College and PAY the \$30 fee to be eligible for the CT Program.

If an applicant has received certification from ARRT in radiography after applying to the CT Program, it is the applicant's responsibility to make sure that information is received by the Program Director.

This form is for informational purposes only and will be completed and signed electronically during application submission.

Informed Knowledge of and Consent to Hazards & Risks

I, _____, want to participate in the Computed Tomography Program at Yakima Valley College.

By signing this *Informed Acknowledgement of and Consent to Hazards & Risks* Form, I acknowledge that:

I have read the Warning and Notification of Hazards & Risks (see page 12) and understand that I may be subject to the possibility of risks of illness, disability, death, exposure to radiation, or injury while participating in educational activities as described in the Warnings and Notification of Hazards & Risks form.

I understand that medical insurance coverage is extremely important to have.

I have informed Radiologic Sciences faculty of my relevant physical or emotional conditions which might pose risk to me or others. If my physical or emotional status should change during the course of my Computed Tomography education and the new status might affect my safety or the safety of others, I will inform appropriate faculty.

I am age 18 or over.

I voluntarily choose to participate in the Computed Tomography Program at Yakima Valley College.

Signature: X _____

Date:

Printed Name:

This form is for informational purposes only and will be completed and signed electronically during application submission.

Applicant Notification Criminal History Background Checks and Drug Screen

Pursuant to RCW 43.43.830.842, employees and volunteers who provide service to developmentally disabled persons, vulnerable adults, and/or children under the age of 16, must successfully pass criminal history background checks as a condition for licensing or certification. You may be ineligible to pursue certification or licensure in your profession based on the results of the Criminal Background checks.

Further, students who are enrolled in an educational program that requires field work experience, clinical training, laboratory experience, or an externship wherein the student will be required to provide service to developmentally disabled persons, vulnerable adults and/or children under the age of 16, will be required to pass criminal history background checks and drug screen prior to clearance for entry to that field work experience, clinical training, laboratory experience, or externship. Inability to participate due to information obtained from the criminal history background checks and drug screen may result in a student's ineligibility to complete the program requirements.

The student will be notified, in a timely manner, if problems are identified. Because certain convictions may prevent you from being eligible for certification/licensure in the profession, it is possible that you could be admitted to, and successfully complete, the program and still be denied certification/licensure. If you have any questions or concerns about your ability to pass a criminal history background check, pursue your education, or practice in the profession, please make arrangements for a confidential appointment with the Radiologic Sciences Program Director. You are also encouraged to contact the American Registry of Radiologic Technologist to discuss eligibility: www.arrt.org

I have been notified by YAKIMA VALLEY COLLEGE Radiologic Science Program that Criminal Background information and Drug Screen procedures are required as part of clinical practicum requirements. I understand that as part of program requirements, I will be furnished information regarding procedures, compliance and deadlines. I further understand that I am responsible for all fees incurred. Failure to comply with these requirements will prohibit clinical practicum.

Last Name:

First Name:

Alias/Maiden Name:

Date:

Signature:

This form is for informational purposes only and will be completed and signed electronically during application submission.

Applicant Disclosure Pursuant to RCW 43.43.834 Child and Adult Information Act

Pursuant to the requirements of RCW 43.43.830.834, we must ask you to complete the following disclosure statement. This information will be kept confidential.

1. Have you ever been convicted of any crimes against children or other persons, as follows: aggravated murder; first or second degree murder; first or second degree kidnapping; first, second, or third degree assault; first, second, or third degree rape; first, second, or third degree rape of a child; first or second degree robbery; first degree arson; first degree burglary; first or second degree manslaughter; first or second degree extortion; indecent liberties; incest; vehicular homicide; first degree promoting prostitution; communication with a minor; unlawful imprisonment; simple assault; sexual exploitation of minors; first or second degree criminal mistreatment; child abuse or neglect as defined in RCW 26.44.020; first or second degree custodial interference; malicious harassment; first, second, or third degree child molestation; first or second degree sexual misconduct with a minor; patronizing a juvenile prostitute; child abandonment; promoting pornography; selling or distributing erotic material to a minor; custodial assault; violation of child abuse restraining order; child buying or selling; prostitution?

Answer: if yes, please explain below:

2. Have you ever been convicted of crimes relating to the financial exploitation if the victim was a vulnerable adult, as follows: first, second, or third-degree extortion; first second, or third-degree theft; first, second, or third-degree robbery; forgery?

Answer: if yes, please explain below:

3. Have you ever been found in any dependency action under RCW 13.34.030 (2) (b) to have sexually assaulted or exploited any minor or to have physically abused any minor?

Answer: if yes, please explain below:

4. Have you ever been found in any domestic relations proceeding under Title 26 RCW to have sexually abused or exploited any minor or to have physically abused any minor?

Answer: if yes, please explain below:

5. Have you ever been found in any domestic relations proceeding under Title 26 RCW to have sexually abused or exploited any minor or to have physically abused any minor?

Have you ever been found in any disciplinary board final decision to have sexually or physically abused or exploited any minor or developmentally disabled person or to have abused or financially exploited any vulnerable adult?

Answer: if yes, please explain below:

6. Have you ever been found in any protection proceeding under chapter 74.24 RCW, to have abused or financially exploited a vulnerable adult?

Answer: if yes, please explain below:

UNDER PENALTY OF PERJURY under the laws of State of Washington, I certify that the foregoing information is true, correct and complete. I understand that if I am admitted to the program, I can be discharged for any misrepresentation or omission in the foregoing statement. I also understand that my acceptance is conditioned on your receipt of a satisfactory report from the Washington State Patrol.

Signature: X _____ Date: _____

If you have concerns about your ability to pursue your education and practice in the profession based on your answers to questions in the Applicant Disclosure form, please make arrangements for a confidential appointment with the Radiologic Sciences Program Director 509.574.4926.

FALSIFICATION OF THIS FORM WILL RESULT IN PROGRAM DISMISSAL.

This form is for informational purposes only and will be completed and signed electronically during application submission.

Applicant Disclosure Personal Data Form

1. Do you have a medical condition which in any way impairs or limits your ability to practice your profession with reasonable skill and safety?

Answer: if yes, please explain below:

“Medical Condition” includes physiological, mental or psychological conditions or disorders, such as, but not limited to orthopedic, visual, speech, and hearing impairments, cerebral palsy, epilepsy, muscular dystrophy, multiple sclerosis, cancer, heart disease, diabetes, mental retardation, emotional or mental illness, specific learning disabilities, HIV disease, tuberculosis, drug addiction and alcoholism.

- 1.a If you answered “yes” to question 1, please explain whether and how the limitations or impairments caused by your medical condition are reduced or eliminated because you receive ongoing treatment (with or without medications).
- 2.a 1b. If you answered “yes” to question 1, please explain whether and how the limitations and impairments caused by your medical condition are reduced or eliminated because of your field of practice, the setting or the manner in which you have chosen to practice.

(If you answered “yes” to question 1, the licensing authority (Board/Commission or Department as appropriate) will make an individualized assessment of the nature, the severity and the duration of the risks associated with an ongoing medical condition, the treatment ongoing, the factors in “1b” so as to determine whether an unrestricted licenses should be issued, whether conditions should be imposed or whether you are not eligible for licensure.)

2. Do you currently use chemical substance(s) in any way which impairs or limits your ability to practice your profession with reasonable skill and safety?

Answer: if yes, please explain below:

“Currently” means recently enough so that the use of drugs may have an ongoing impact on one’s functioning as a licensee, and includes at least the past two years.

“Chemical substances” includes alcohol, drugs or medications, including those taken pursuant to a valid prescription for legitimate medical purposes and in accordance with the prescriber’s direction, as well as those used illegally.

3. Have you ever been diagnosed as having or have you ever been treated for pedophilia, exhibitionism, voyeurism or frotteurism?

Answer: if yes, please explain below:

4. Are you currently engaged in the illegal use of controlled substances?

Answer: if yes, please explain below:

“Currently” means recently enough so that the use of drugs may have an ongoing impact on one’s functioning as a licensee, and includes at least the past two years.

“Illegal use of controlled substances” means the use of controlled substances obtained illegally (e.g., heroin, cocaine) as well as the use of legally obtained controlled substances, not taken in accordance with the directions of a health care practitioner.

Note: If you must answer “yes” to any of the remaining questions, provide an explanation and copies of all judgements, decisions, orders, agreements and surrenders.

5. Have you ever been convicted, entered a plea of guilty, nolo contendere or a plea of similar effect, or had prosecution or sentence deferred or suspended, in connection with:
- a. The use or distribution of controlled substances or legend drugs
Yes No
 - b. A charge of a sex offense
Yes No
 - c. Any other crime, other than minor traffic infractions? (Including driving under the influence and reckless driving)
Yes No
6. Have you ever been found in any civil, administrative or criminal proceeding to have:
- a. Possessed, used, prescribed for use, or distributed controlled substances or legend drugs in any way other than for legitimate or therapeutic purposes, diverted controlled substances or legend drugs, violated any drug law, or prescribed controlled substances for yourself?
Yes No
 - b. Committed any act involving moral turpitude, dishonesty or corruption?
Yes No
 - c. Violated any state or federal law or rule regulating the practice of a health care professional?
Yes No
7. Have you ever been found in any proceedings to have violated any state or federal law or rule regulating the practice of a health care profession? If “yes”, explain and provide copies of all judgments, decisions, and agreements.
Yes No

If yes, please explain:

8. Have you ever had any license, certificate, registration or other privilege to practice a health care profession denied, revoked, suspended, or restricted by a state, federal, or foreign authority, or have you ever surrendered such credential to avoid or in connection with action by such authority?
Yes No
9. Have you ever been named in any suit or suffered any civil judgement for incompetence, negligence or malpractice in connection with the practice of a health care profession?
Yes No

If yes to any of the above, identify state of offense:

Signature: X

Date: Printed Name:

FALSIFICATION OF THIS FORM WILL RESULT IN PROGRAM DISMISSAL

Non-Discrimination Statement

Yakima Valley College does not discriminate against any person on the basis of race, color, national origin, disability, sex, genetic information, or age in admission, treatment, or participation in its programs, services and activities, or in employment.

All inquiries regarding compliance should be directed to:

Executive Director of Human Resource Services

YVC, South 16th Av & Nob Hill Blvd

Yakima WA 98902

END OF THE APPLICATION PACKET