

UNIVERSITY OF PUERTO RICO  
 MEDICAL SCIENCES CAMPUS  
 SCHOOL OF HEALTH PROFESSIONS  
 RADIOLOGIC TECHNOLOGY PROGRAM

REPEATED IMAGING FORM

**JRCERT STANDARD FOR OBJETIVE 4.6 “Assure that students are directly supervised by a qualifies radiographer when repeating unsatisfactory images. The Technologist assures safety; proper educational practice must be physically present and approve procedures.**

To monitor the repeat image policy the student must complete the form for all images repeated. This form will stay in the Clinical Practice Manual and will be reviewed by the faculty for repeat. Reason for repeat:

Repeat Examination	Over-exposed	Under-exposed	Motion	Positioning	Artifacts	Off Center	Total
Finger							
Hand							
Wrist							
Forearm							
Elbow							
Humerus							
Shoulder							
Foot							
Ankle							
Calcaneus							
Leg							
Knee							
Patella							
Femur							
Chest							
Ribs							
Shoulder							
C-spine							

Repeat Examination	Over-exposed	Under-exposed	Motion	Positioning	Artifacts	Off Center	Total
T-spine							
L-spine							
Sacrum							
Coccyx							
Abdomen							
Pelvis							
Hips							
Skull							
Facial Bone							
Sinuses							
BS							
UGIS							
SB							
BE							
IVP							
Cystogram							
Arthogram							
Other							
Total							

Comments: \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 Students Signature

\_\_\_\_\_  
 Supervisor Signature

\_\_\_\_\_  
 Clinical Supervisor Signature (Faculty)

\_\_\_\_\_  
 Clinical Coordinator Signature