



WALLACE STATE HANCEVILLE

DIAGNOSTIC IMAGING

Congratulations! You have taken the first step toward entering a quality educational program that will prepare you to work in the health care field.

The Diagnostic Imaging program is designed to provide qualified technologists for Diagnostic Imaging departments of hospitals and clinics. Students are taught the fundamental principles underlying all phases of Radiologic Technology. The Program is accredited by the Joint Review Committee on Education in Radiologic Technology in collaboration with the Commission of Accreditation of Allied Health Education Programs. Upon graduation, the student is eligible to apply to take the registry examination of the American Registry of Radiology.

Diagnostic Imaging Purpose & Mission Statement

WSSC Diagnostic Imaging Program's mission is to provide a quality education that enables students to develop the knowledge and skills necessary for entry proficiency as a radiologic technologist and continued growth as a professional. The Associate Degree in Diagnostic Imaging provides the best mechanism to enter basic Radiologic Technology practice and obtain an educational background for continued professional development.

Program Goals & Outcomes

1. The Diagnostic Imaging Program will provide a quality education.
 - 1.1 The program provides an education that promotes student success and retention.
 - 1.2 The program provides an education that prepares graduates to be successful on the ARRT Registry Exam.
 - 1.3 The program produces a graduate who is prepared to enter the workforce.
2. Diagnostic Imaging graduates will possess the knowledge required to function as a beginning level radiologic technologist.
 - 2.1 Graduates will possess the knowledge to pass the ARRT Licensure Examination.
 - 2.2 Students will demonstrate appropriate problem solving and critical thinking.
 - 2.3 Graduates are prepared to perform as entry level practitioners.
3. Diagnostic Imaging graduates will demonstrate competent basic skills in their radiologic technologist practice.
 - 3.1 Graduates will be able to adequately perform routine examinations.
 - 3.2 Graduates will be able to produce films of diagnostic quality.
 - 3.3 Graduates will provide a high standard of patient care to all patients.
 - 3.4 Graduates will demonstrate appropriate communication skills.
4. Diagnostic Imaging graduates will continue to grow as professionals
 - 4.1 Students and graduates will conduct themselves in an ethical and professional manner.
 - 4.2 Graduates advance in the profession through continued formal and informal education.
 - 4.3 Graduates participate in Professional organizations.



DIAGNOSTIC IMAGING PROGRAM APPLICATION CHECKLIST

Prior to APPLICATION to the program, the following must be complete:

SUBMIT TO THE ADMISSIONS OFFICE

- WSCC application
- Official transcripts from all colleges previously attended
- Proof of high school graduation (transcripts) or GED certificate
- Compass Test** Scores in Math, Reading & Writing (within 3 years of application to the program)

NOTE: *Student should check with the college admissions to ensure that their Compass Test Scores are included along with transcripts.*

Submit a *COMPLETE program application packet to the Diagnostic Imaging Program Director that includes

- Program application ([jump to application](#))
- Completed Essential Functions Form ([jump to essential functions form](#))
- Copy of All College Transcripts
- Proof of age, (**copy of birth certificate**) 18 by August 15 (Alabama Regulations For Control of Radiation Rule 420-3-03(6), "Occupational Radiation Dose Limits", states that all occupational workers employing ionizing radiation must be at least 18 years of age).

Upon acceptance all health science division students are required to have drug screenings and background check. Drug Policy and Background Check Policy are available for viewing online at www.wallacestate.edu.

***All information requested must be included for a packet to be complete. Any piece** of missing documentation will result in the application **not be** considered for admission. **Information will not be accepted via fax - it must be delivered in person or via mail by the deadline date.**

***Must be submitted in person or by mail.** When mailing your application, to ensure receipt, please send completed packet by **certified mail**. **Due to the high number of applications, the receipt of an application will not be confirmed.**

You will be notified in by mail of your status for Fall admission. No information will be given over the telephone. PLEASE do not call Admissions or the Program Department for information regarding your application packet.

YOU SHOULD RETAIN COPIES OF THE APPLICATION PACKET YOU SUBMIT. If you reapply in the future, information will not be released from previous application packet.

NOTE: It is the responsibility of each applicant to ensure that the application is complete and that all information is on file. If application packet does not include all information listed above at the time it is submitted to the department, **it will be rejected.**



DIAGNOSTIC IMAGING PROGRAM APPLICATION

Applications will be accepted until June 15.
Applications received after June 15 will be considered on space available basis.

[\(return to checklist\)](#)

WSCC Student ID: _____

Date: _____

Name: _____
Last First Middle/Maiden Social Security No.

Mailing Address _____ City _____ State _____ Zip Code _____

E-Mail Address: _____

Home Phone: _____ Cell Phone: _____

Sex: M F Marital Status: M S D W Birth Date: _____ Place of Birth: _____

Person to Notify in an Emergency:

Name _____ Relationship _____ Phone _____

Previous Education: (High School and/or College)

School _____ City/State _____ Diploma or Degree _____ Date _____

Have you completed prerequisites for admission into the Diagnostic Imaging Program? Yes No

If no, prerequisites needed at time of application? _____

I plan to apply for entry into the Diagnostic Imaging Program Fall Semester of _____ Year.

ATTACH: COPY OF BIRTH CERTIFICATE, COMPLETED ESSENTIAL FUNCTIONS FORM, and Copy of All College Transcripts. Please call the Program Staff (256-352-8309 or 256-352-8315) for any questions.

If you are applying to other allied health or nursing programs, please list your order of preference for admission:

1. _____ 2. _____ 3. _____

Student Signature _____

Date _____

Mail completed application to:
Diagnostic Imaging Program Director
Wallace State Community College
P. O. Box 2000
Hanceville, AL 35077-2000

For official use only:
Date Received: _____
Official Initials: _____
Application Complete Yes No
Additional documentation required:

Radiologic Technology Program Essential Functions

[\(return to checklist\)](#)

		Yes	No	If no, please comment
Mobility	1. Have physical stamina to stand and walk for 8 hours or more in a clinical setting	<input type="checkbox"/>	<input type="checkbox"/>	
	2. Can stand on both legs, move from room to room, And maneuver in small spaces. <i>Physical disabilities must not pose a threat to the safety of the student, faculty patients, or other health care workers.</i>	<input type="checkbox"/>	<input type="checkbox"/>	
Flexibility	1. Can bend the body downward and forward by bending at the spine and waist.	<input type="checkbox"/>	<input type="checkbox"/>	
	2. Can flex and extend all joints freely.	<input type="checkbox"/>	<input type="checkbox"/>	
Strength	1. Can raise objects from a lower to a higher position or move objects horizontally from position to position. <i>This factor requires the substantial use of the upper extremities and back muscles.</i>	<input type="checkbox"/>	<input type="checkbox"/>	
	2. Possess mobility, coordination and strength to push, pull or transfer heavy objects. (Strength to lift 25 lbs. frequently and 50 lbs. or more occasionally).	<input type="checkbox"/>	<input type="checkbox"/>	
Fine Motor Skills and Hand/Eye Coordination	1. Possess manual dexterity, mobility, and stamina to perform CPR.	<input type="checkbox"/>	<input type="checkbox"/>	
	2. Can seize, hold, grasp, turn and otherwise work with both hands.	<input type="checkbox"/>	<input type="checkbox"/>	
	3. Can pick, pinch, or otherwise work with the fingers.	<input type="checkbox"/>	<input type="checkbox"/>	
Auditory Ability	1. Possess sufficient hearing to assess patient's needs, follow instructions, communicate with other health care workers, as well as respond to audible sounds of radiographic equipment. <i>Please comment if corrective devices are required.</i>	<input type="checkbox"/>	<input type="checkbox"/>	
Visual Acuity	1. Possess the visual acuity to read, write and assess the patient and the environment. <i>Possess comment if corrective devices are required.</i>	<input type="checkbox"/>	<input type="checkbox"/>	
Communication	1. Possess verbal/nonverbal and written communication skills adequate to exchange ideas, detailed information, and instructions accurately.	<input type="checkbox"/>	<input type="checkbox"/>	
	2. Able to read, comprehend, and write legibly in the English language.	<input type="checkbox"/>	<input type="checkbox"/>	
Interpersonal Skills	1. Able to interact purposefully and effectively with others.	<input type="checkbox"/>	<input type="checkbox"/>	
	2. Able to convey sensitivity, respect, tact, and a mentally healthy attitude.	<input type="checkbox"/>	<input type="checkbox"/>	
	3. Oriented to reality and not mentally impaired by mind-altering substances.	<input type="checkbox"/>	<input type="checkbox"/>	
	4. Able to function safely and effectively during high stress periods.	<input type="checkbox"/>	<input type="checkbox"/>	