Frequently Cited Standards in 2022

Below are the most commonly cited Standards from site visits conducted in 2022. Please contact the JRCNMT office if you have questions regarding compliance.

C1 Master Plan
Programs must develop a master plan that contains specific documents, some collected from routine activities (syllabi) and others created specifically for the plan (educational philosophy). The various documents should be kept together in digital format so the information is available to all program faculty and can be passed on should there be a change in program leadership. It is important that a program’s master plan address each lettered item listed within Standard C1.

C1d requires programs to have written guidelines for making clinical assignments, demonstrating that all students will have the opportunity to meet required competencies and have an equivalent education experience to all other students in the program (A3.2a).

D2.3 Formative and Summative Evaluation of Students
Programs must schedule assessments throughout each clinical rotation so students receive ongoing feedback, allowing them to make performance improvements before the clinical rotation ends.

D3.1b Assessment of Program Effectiveness – Graduate Performance on Certification Exams
Programs must report certification exam data in the Annual Report on Form L. The JRCNMT sets the benchmark for this program effectiveness parameter at an 80% pass rate or higher for a first-time examinees during a rolling three-year period. This data point is reviewed holistically with all other program effectiveness information provided annually on Form L but a pass rate below the benchmark results in subsequent progress reports and can result in a program being placed on probation if the issues is not successfully addressed after a reasonable period of time.

D3.3 Advisory Committee Membership and Meeting Frequency
All affiliate education supervisors (AES) constitute a program’s Advisory Committee, along with other members required by institutional policy or appointed by the program.

Programs should ensure that all affiliate education supervisors (AES) know they are part of this committee, especially newly appointed people and those at new affiliates.

E3.3 Radiation Dosimeter Records
Radiation exposure records shall be discussed with students at regular intervals, not less than quarterly. Documentation of these reviews shall be maintained.

Programs should have written or digital confirmation that each student reviewed his/her dosimeter readings at least quarterly during the program and had the opportunity to ask questions about exposure levels. Emailing dosimeter readings to students without requiring proof the email was read is not acceptable. Programs frequently meet this standard by having students initial and date dosimeter reports or a student-specific dosimeter readings document. Some programs are also using course management software to disseminate dosimeter readings and confirm student review of them.

It's imperative that students sign or initial and date the dosimeter reading document they review. If this is done digitally in a course management system, ensure there is a date stamp for when the student reviewed the results.