

Washtenaw Community College
Computed Tomography (CPCTOM)
Fall 2018 Application Packet

NOTICE OF APPLICATION CHANGE:

The department has made a change to their **optional** requirements which will become effective with the Fall 2018 admitted class.

Effective **immediately**, students will no longer have the option of earning additional points towards their program application for having experience. This includes employment experience, community service, volunteer hours, or completion of a high school health science technology program.

The original Fall 2018 program application packet included an experience option and was posted to WCC's website on November 1, 2017. The packet has been updated to reflect these changes and was reposted on November 16, 2017.

Please direct all questions or concerns regarding this change to Connie Foster (Program Director) at (734) 973-3418 or cfoster@wccnet.edu.

If you have question about submitting your application to the program, please contact the Health and Second Tier Admissions Office at (734) 973-3596, (734) 477-8998, or healthadmissions@wccnet.edu.

Washtenaw Community College
Computed Tomography (CPCTOM)
Fall 2018 Entry (2018-19 Academic Year)
Application Deadline: May 4, 2018 (or until all accepted and/or alternate seats are filled)
PROGRAM APPLICATION AND REQUIREMENTS CHECKLIST

WCC Student ID: _____ Date: _____
Last Name: _____ First Name: _____ Middle Name: _____
Former/Previous Names: _____
*Street Address: _____ Apt: _____
City: _____ State: _____ Zip: _____ County: _____
Home Phone: (____) _____ Cell Phone: (____) _____ Work Phone: (____) _____
WCC Email/netID: _____ Other Email: _____

*The contact information provided above MUST match WCC's records. You can confirm and/or change your contact information at any time by logging into your *WCC Gateway* account and clicking on *MyWCC* and then *Personal Information*. Your address MUST match your current "Basic" address on record. (Your "Mailing" address is NOT sufficient for residency verification.)

Program Description

The Computed Tomography (CT) program is a post-associate degree advanced certificate program that is designed for registered radiologic technologists (ARRT), radiation therapists (ARRT), and nuclear medicine technologists (ARRT or NMTCB). This program offers the didactic and clinical experience that will provide students with the knowledge and skills that are required to become entry-level computed tomography technologists. The curriculum is based on the recommended American Society of Radiologic Technology (ASRT) computed tomography guidelines. Upon successful completion of this program, students are eligible to take the ARRT post-primary certification examination in computed tomography.

Important Information

The requirements below are based on the academic year stated on the top of this document. Prerequisite and program requirements along with WCC's point system and scales are reviewed annually and subject to change. Students are expected to meet the prerequisite and program requirements of the catalog term for the semester in which they **first begin** the program.

Individuals who have been charged or convicted of a misdemeanor or felony must undergo the ethics pre-application review process through the American Registry of Radiologic Technologists (ARRT) and receive clearance from ARRT to take the national board examination **prior to applying for the program**. Contact the ARRT at (651) 687-0048 or visit their website at www.arrt.org for more information. Please note that the ARRT ethics pre-application process may take up to 12 weeks to complete.

Admission Process

WCC has a competitive admission process. For post-associate certificate programs, priority admission and continued enrollment will be given to eligible WCC students currently enrolled in the final year of the prerequisite associate degree program (WCC Radiography students who are expected to graduate in Spring/Summer prior to the start of the program are given priority). Applicants are required to meet all admission criteria and will be ranked based on a point system. The best qualified applicants will be selected for admission to the program. Details regarding WCC's **Admission to High Demand Programs** policy including priority levels can be found on WCC's website at <http://www.wccnet.edu/trustees/policies/2005/>. Details regarding WCC's point scales that are used to calculate points can be found on WCC's Enrollment Steps for Health and Second Tier Program Students website at <http://www.wccnet.edu/studentconnection/admissions/health-second-program/>.

Applying to the Program

Each year, approximately 12 students are accepted to the program for a Fall semester start. A formal application to the program is required after the student has been accepted to the school. Completed applications can be submitted anytime during the application window.

WCC Radiography students who are currently enrolled in the final year of their program and are expected to graduate in the Spring/Summer 2018 semester are given priority and may submit an incomplete program application after the Winter 2018 semester and before the application deadline. It is strongly recommended that WCC Radiography graduates schedule and sit for their ARRT Certification Examination within the two weeks following the completion of their program. Verification of all pending admission requirements/criteria must be submitted by **August 10, 2018** to be eligible to begin the program if accepted. Students who submit their application after the deadline will forfeit their priority status.

Requirement After Acceptance:

Upon notification of acceptance to the program, students must purchase an account for a college-designated vendor to obtain a criminal background check and to track their health records. The criminal background check and health records must be submitted to the designated vendor before attending the mandatory orientation session. Specific information on the college-designated vendor will be included in the program acceptance letter.

Extenuating Application Process

If there are not enough applicants to fill all accepted and/or alternate seats in the program by the initial application deadline, the application will remain available on the website after this deadline until all seats are filled. Once all seats are filled, the application will be removed from the website and applications will no longer be accepted for the current admission cycle.

If the application remains available on the website after the initial application deadline, students who anticipate meeting all program admission requirements by the end of the Spring/Summer 2018 semester are encouraged to submit an incomplete application to be considered for an accepted and/or alternate seat on a conditional basis. Students submitting an incomplete application after the initial application deadline will be considered for a seat based on the date the application was received by the Health and Second Tier Admissions Office. If multiple applications are submitted in a day, applicants will be chosen based on a lottery for their position. Please contact the Health and Second Tier Admissions Office for clarification of this process.

Transcripts

Only official transcripts will be evaluated for transfer credit and applied towards your application. If course work (including prerequisites, support courses, and/or other applicable admission requirements/criteria) was completed at multiple institutions, an official transcript must be received from each institution. Incoming official transcripts must have appropriate signatures and/or official college seals. **Transcripts must be sent directly to WCC from an issuing institution or sealed if issued to the student.** Official transcripts are not needed for course work completed at WCC. Foreign high school transcripts will not be used for validation of course work when high school course work is applicable. For additional details regarding transfer credit and credit for prior learning (including foreign education, portfolio review, AP, CLEP, articulation, military, etc.) please visit WCC's website at <http://www.wccnet.edu/services/transferresources/credittowcc/>.

Course Clarification

All defined courses plus substitutions that are approved by the department prior to the application deadline will be used to meet prerequisite and/or support course requirements. If a course is not clearly stated on your transcript and/or the course cannot be determined an equivalent based on the course description, you must provide a course syllabus for further review by the application deadline. If two (2) or more transfer courses are completed to meet the equivalent of one (1) of WCC's required prerequisite or support courses, students **must** meet the minimum grade requirement in each course. **Grades will not be averaged.** WCC is not responsible for your application being delayed due to lack of clarification or approval of a substitution.

Required Checklist

All of the requirements below **must** be successfully completed before submitting an application to the program. All prerequisite courses must be successfully completed **with grades posted** to your transcript and all required forms and supporting documentation needs to be submitted with your application. **This includes all necessary official transcripts unless previously submitted and received by WCC's Records Office.** WCC transcripts are not required.

1. Admission to WCC

An admission application to the school can be submitted on WCC's website at www.wccnet.edu/apply.

___ 2. Program Prerequisite Courses

___ a. Cross-Sectional Anatomy Course from JRCERT Accredited College or Hospital-Based Radiography Program or RAD 223 (Sectional Anatomy)* with a minimum grade of **B/3.0**

- Level I Prereqs (RAD 223): Academic Reading and Writing Levels of 6; RAD 217 minimum grade C-/1.7

___ Course Completed: _____ School: _____

*Transfer students who do not have an equivalent course and would like to register for WCC's RAD 223 course should contact the Radiography Program Director to request an override.

___ 3. Graduate of **one (1)** of the accredited programs below

___ School(s) Graduated From: _____

___ Joint Review Committee on Education in Radiologic Technology (JRCERT)

___ Joint Review Committee on Educational Programs in Nuclear Medicine Technology (JRCNMT)

___ I am expecting to graduate from WCC's Radiography program in the Spring/Summer semester and I will submit upon completion.

You can verify that your school's program is accredited by going to one of the following websites:

JRCERT accredited programs: <http://www.jrcert.org/find-a-program/>

JRCNMT accredited programs: <http://www.jrcnmt.org/find-a-program/>

___ 4. Current American Registry of Radiologic Technologists (ARRT) or Nuclear Medicine Technology Certification Board (NMTCB) Registration Card Showing Primary Certification in **one (1)** of the areas below

___ Must include copy of registration card showing primary certification in **one (1)** of the following areas:

___ Radiography (R)

___ Nuclear Medicine (N)

___ Radiation Therapy (T)

___ Certified Nuclear Medicine Technologist (CNMT)

___ I am expecting to graduate from WCC's Radiography program in the Spring/Summer semester and I will submit upon completion.

___ 5. Minimum Cumulative College GPA of **3.0**

The total cumulative GPA of all schools* in which you completed your program discipline courses and that provide any required program prerequisite courses will be included in the calculation.

___ I am expecting to graduate from WCC's Radiography program in the Spring/Summer semester. (GPA will be verified after the completion of your program.)

*Students who graduated from a hospital based program in partnership with another college/university, must submit official transcripts from both institutions.

___ 6. Program Application and Requirements Checklist (this form)

___ 7. Communication Acknowledgement Form

___ 8. Additional Information Form

___ 9. Abilities Statement

___ 10. Residency Verification

For more information on WCC's policies and procedures regarding residency or to learn of additional documentation that can be submitted to verify residency, please visit WCC's website at www.wccnet.edu/residency. **The student's residency status may be updated accordingly based on the documentation submitted.**

___ Must include a copy of the front and back of your Driver's License or State ID Card.

Optional Checklist

The items below are **not required to apply** to the program. However, by successfully completing and/or meeting these items by the application deadline, you can earn additional points which could give you a more competitive edge. **Please remember official transcripts must be submitted to verify these requirements unless previously submitted and received by WCC's Records Office. WCC transcripts are not required.**

- ___ 1. **Veteran Status**
___ Submit form DD-214 to verify status.

- ___ 2. **Associate Degree or Higher Degree from an Accredited U.S. College or University**
___ Graduation Date: _____ Degree: _____ School: _____

- ___ 3. **Alternate Candidate Status**
Students who made alternate candidate status and did not make admission to the program based on a previous application will be awarded additional points. Students will only be awarded points for this status under WCC's competitive admission process and not the old waitlist process.
___ Previous Alternate Candidate Semester(s): _____

Entrance Requirements

- 1. Mandatory attendance at the new student orientation session upon acceptance into the program. Students who do not make admission but are given alternate candidate status will be required to attend orientation to be eligible to move to accepted status if a seat becomes available.
- 2. Upon acceptance to the program, a criminal background check must be obtained from the college-designated vendor **before** attending orientation. Specific information regarding the vendor will be included in the program acceptance letter.
- 3. Students must pay a one-time fee to participate in the online immunization record tracking system. Prior to attending orientation, students must upload all required health information. Detailed information regarding the online immunization tracking system will be provided in the student's acceptance letter. Students who do not make admission but are given alternate candidate status will be provided with this same information and must meet the same requirements to be eligible to move to accepted status if a seat becomes available. **Please DO NOT submit the required documents below until AFTER you have been provided with the necessary details. (Documentation submitted with your application will not be reviewed.)**
 - a. Submit a completed Report of Medical History form (physical examination by licensed physician)
 - b. Submit proof of a negative TB skin test
 - c. Submit proof of a current vaccination record (you may be asked to update vaccines)
 - d. Submit proof of a current Flu vaccine
 - e. Submit proof of current health insurance (health insurance must remain active throughout the entire program)
 - f. Submit a current certification in BLS/CPR with First Aid for the professional rescuer or health care providers
 - i. Certification must be from AHA (American Heart Association) or American Red Cross only. No other organizations will be accepted.
 - ii. Students can obtain CPR/AED/First Aid certification by completing **HSC 131** (CPR/AED for the Professional Rescuer and First Aid) at WCC.
 - g. Submit current American Registry of Radiologic Technologists (ARRT) or Nuclear Medicine Technology Certification Board (NMTCB) registration card.
- 4. Students who fail to comply or meet the above requirements will forfeit their seat in the program.

Continuing Eligibility Requirements

- 1. Additional criminal background checks may be conducted at any time during the program. Students may be required to have drug testing as well as additional criminal background checks and/or fingerprinting prior to the start of a clinical sequence as requested by specific clinical facilities. Failure to receive an acceptable drug test and/or criminal background/fingerprinting check at any time, will result in dismissal from the program.

PROGRAM APPLICATION AND REQUIREMENTS CHECKLIST continued for CPCTOM Fall 2018 (2018-19 Academic Year)

2. Student will be required to attend a hospital orientation session prior to starting their clinical rotation.
3. Students will be required to submit health records annually while in the program and must complete any other health requirements as designated by the clinical sites.
4. Students will be required to purchase special uniforms and supplies throughout the duration of the program.
5. Students are required to demonstrate that they have maintained competency in all skills taught throughout their progression through the program. Failure to demonstrate continued competency will result in dismissal from the program.
6. All Computed Tomography (CT) courses must be completed with a minimum grade of C/2.0.
7. Students must have reliable transportation to clinical education sites, which may require a commute of up to one hour.
8. Students who are dismissed from the program may not be eligible to reapply to the program.

Students with questions or concerns regarding WCC's competitive admission process or submitting an application to the program should contact the Health and Second Tier Admissions Office.

Program applications along with all documentation needed to verify completion of requirements can be mailed to the address below or submitted to Student Connection located on the 2nd floor of the Student Center Building (SC 203).

Health and Second Tier Admissions Office
Washtenaw Community College
4800 E Huron River Dr
Ann Arbor, MI 48105

I have successfully completed all required checklist items and I have included all documentation needed to verify these requirements.

Printed Name: _____

Student ID: _____

Signature: _____

Date: _____

Washtenaw Community College
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Fall 2018 Entry (2018-19 Academic Year)
COMMUNICATION ACKNOWLEDGEMENT FORM

WCC sends **all communications** regarding a student's Health and Second Tier Admissions Application Status, beginning with the application process through the admission process, directly to the WCC student email address **ONLY**. Therefore, it is extremely important that students check their WCC student email on a regular basis so they do not jeopardize their status. WCC assumes that any information sent to a student's WCC email has been received and reviewed by the student. Please complete this form to confirm acknowledgement of this information.

Please **carefully read** the statements below and **initial EACH ONE** to confirm you understand and acknowledge:

- _____ 1. I understand that from this point on, all future communication regarding my status will be sent directly to my **WCC student email address ONLY**.
- _____ 2. I agree to check my student email on a regular basis and review all information sent by the Health and Second Tier Admissions Office so I do not jeopardize my status.
- _____ 3. I understand that even though all communication will be sent to my student email address, WCC will occasionally send communications by mail.
- _____ 4. I understand that if my address on record is inactivated due to returned mail by the Post Office, WCC will inform me through my student email and I will be given a deadline by which I must update my address in order to maintain my status.
- _____ 5. I understand that if WCC is unable to contact me regarding my status and/or I fail to call/respond to any contacts made by the Health and Second Tier Admissions Office regarding my status, **my application will be closed**.
- _____ 6. I agree to keep all my contact information updated and current in the College system (including addresses, emails, and phone numbers). I understand that my contact information can be updated at any time through my *WCC Gateway* account by clicking on *MyWCC* and then *Personal Information*. Or, I may update this information at Student Connection located on the 2nd floor of the Student Center Building or by calling (734) 973-3543.

I have read, understand, and initialed **all** of the above statements.

Printed Name: _____

Student ID: _____

Signature: _____

Date: _____

Washtenaw Community College
Computed Tomography (CPCTOM)
Fall 2018 Entry (2018-19 Academic Year)
ADDITIONAL INFORMATION FORM

The additional information below is important and pertains to the program. **Please carefully read the statements below and initial each one to show you understand them.**

- _____ 1. I understand admission to this program is based on WCC's *Admission to High Demand Programs* policy.
- _____ a. I have read the ***Admission to High Demand Programs*** policy on WCC's website at <http://www.wccnet.edu/trustees/policies/2005/>.
- _____ b. I have reviewed the competitive admission process ***Point Scales for All Programs*** on WCC's Enrollment Steps for Health and Second Tier Program Students website at <http://www.wccnet.edu/studentconnection/admissions/health-second-program/>.
- _____ c. I have had all my questions and/or concerns pertaining to WCC's competitive admission process answered by the Health and Second Tier Admissions Office.
- _____ 2. I understand admission requirements/criteria and program requirements (including courses, minimum grade, and GPA requirements) along with WCC's point system and scales are reviewed annually and subject to change.
- _____ a. I understand I am expected to meet all admission requirements/criteria for the semester(s) for which I apply, and if offered admission, I must meet all program requirements based on the **catalog term** of when I **first begin** the program.
- _____ 3. I understand students are sent an email upon receipt of their program application as confirmation their application was received. However, I understand that it may take anywhere from **2 weeks to 8 months** before my application will be reviewed and processed depending on the time of year and the number of health applications submitted at that given time. And, that applications are reviewed in the order they are received with consideration to all health program application deadlines and class determination dates.
- _____ a. I understand that after my application is reviewed, and if it is determined that I meet all minimum admission requirements to be considered for admission to the program during this admission cycle, I will be notified by email. However, I understand that all optional items completed to earn additional points towards my application will **not** be reviewed or processed until **after** the application deadline.
- _____ 4. I understand that after WCC has reviewed and processed all applications for this cycle, the class will be determined and the communications below will be sent depending on your status.
- _____ a. I understand that if accepted or given alternate candidate status in the program, I will be sent an official letter by email and mail. And, in this letter/email, I will be notified of the date, time, and location of the mandatory orientation session along with other important deadlines and dates. In addition, I will be provided with details regarding the purchase of an account through the college-designated vendor for obtaining criminal background checks and submitting and tracking my health records for maintaining my status in the program.
- _____ i. I understand an alternate candidate does not need to submit a criminal background check through the college-designated vendor. However, I understand that if moved to accepted status, I must submit my criminal background check within 5 business days of my official notification to maintain my status in the program.

ADDITIONAL INFORMATION FORM continued for CPCTOM Fall 2018 (2018-19 Academic Year)

- _____ ii. I understand an alternate candidate should be prepared to take the place of any accepted student who is unable to start the program. And, to be eligible to move into the program if a seat becomes available, I must maintain my alternate status by meeting the requirements outlined in my official letter/email. I understand that if I maintain my status, I will remain an alternate for this admission cycle through the start of the semester. And, if a seat opens in the meantime, I will be accepted and informed by email.

- _____ iii. I understand as an alternate candidate, if I am **not** offered admission to the program prior to the start of the semester or I do not meet requirements needed to maintain my status, **my application will be closed**.

- _____ b. I understand that if I am **not** accepted or given alternate candidate status in the program, I will be notified by email. And, at that time, my application will remain open through the start of the semester. I understand that in the event that the alternate candidate list is exhausted, there is a chance I will be called into the program. However, I understand **my application will be closed** after the semester begins.

- _____ i. I understand WCC strongly recommends that I meet with the Health Programs Counselor for advising to discuss ways to make my application more competitive.

- _____ 5. I understand that if I have been charged or convicted of a misdemeanor or felony, I must undergo the ethics pre-application review process through the American Registry of Radiologic Technologists (ARRT) and receive clearance from the ARRT to take the national board examination. And, that I will be required to submit additional documentation showing the ARRT has declared me eligible for certification and registration after undergoing the criminal background check through the college-designated vendor upon acceptance to the program.
 - _____ a. I understand that if charged or convicted of a misdemeanor or felony, it is recommended that I start the ARRT ethics pre-application process prior to applying to the program as it may take up to 12 weeks to complete. And, that if I have questions regarding this process, I should contact ARRT at (651) 687-0048 or visit their website at www.arrt.org for more information.

- _____ 6. I understand that program applications are semester specific and only valid for the semester for which I applied. And, that if my application is closed for any reason and I wish to be reconsidered for admission to the program, I must meet current admission requirements and submit a new program application.

I have read and initialed all statements listed above showing I understand them.

Printed Name: _____

Student ID: _____

Signature: _____

Date: _____

Washtenaw Community College
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ABILITIES STATEMENT

Admission to the Computed Tomography (CT) program is contingent upon students declaring that they have specific psychomotor, affective, and cognitive abilities. These requirements are detailed below. WCC reserves the right to request that students successfully demonstrate the specific cognitive and physical abilities related to the CT program.

Abilities necessary to ensure attainment of competencies in the Computed Tomography (CT) program. The student must be able to:

1. Communicate, both verbally and in writing, at a professional level.
 - a. Demonstrate English language proficiency with sufficient skill to communicate.
 - b. Provide clear and audible directions to patients face-to-face and from the CT control booth area, which may be 20 feet away from the patient.
 - c. Read and interpret the physician's orders and corresponding paperwork.

2. Demonstrate sufficient locomotor skills to move from room to room and maneuver in small spaces.
 - a. Be able to push, pull, and lift 50 pounds.
 - b. Push and adjust a stretcher and/or wheelchair without injury to self, patient, or others.
 - c. Lift and transfer patients from a wheelchair or stretcher to a CT table or to a patient's bedside.
 - d. Move and adjust CT equipment, accessories, and ancillary devices as needed for patient imaging.
 - e. Wear a lead apron weighing approximately eight to fifteen pounds for extended periods of time.
 - f. Assist in the care of patients without obstructing the positioning of necessary equipment or other health care workers vital to the treatment of the patient.

3. Possess sufficient gross and fine motor abilities to provide safe and effective patient care.
 - a. Must be able to reach overhead to manually move the monitors and power injectors at various angles at heights up to 6 feet.
 - b. Manipulate dials, buttons, levers, switches and keyboard of various sizes as needed to operate CT equipment and ancillary devices.
 - c. Properly palpate anatomical landmarks as needed to position the patient for a CT procedure.
 - d. Physically place patients in proper positions for CT procedures according to established standards.
 - e. Must be able to align the patient to the gantry, attach cardiac leads, and connect infusion tubing in a timely manner for all CT procedures.
 - f. Handle, load, and manipulate power injectors as required for each CT procedure.
 - g. Load sterile contrast media and other solutions without contaminating the syringe, infusion set, or other infusion equipment.
 - h. Ability to apply and wear protective gloves and personal protective devices for the purpose of universal or standard precautions.
 - i. Properly angle the CT gantry.
 - j. Properly manipulate all locks on the CT table.
 - k. Physically be able to administer emergency care including performing CPR.
 - l. Physical ability to work standing on your feet 90% of the time.
 - m. Ability to use computers and computer systems to enter and process data.
 - n. Possess good eye/hand/foot coordination in order to operate CT equipment properly and in a timely manner.
 - o. Assist patient in dressing and undressing for a CT procedure.

ABILITIES STATEMENT continued for CPCTOM Fall 2018 (2018-19 Academic Year)

4. Possess auditory abilities sufficient to monitor and assess patient needs, and to provide a safe environment for self, patient, and others.
 - a. Hear equipment alarms, monitor alarms, emergency signals, and cries for help.
 - b. Respond to codes over hospital intercoms (i.e. fire, child abduction, cardiac arrest...)
 - c. Ability to distinguish sounds and voices over background noise such as patient monitoring equipment, intercom, and exposure signal.
 - d. Monitor equipment operation or dysfunction which may be indicated by low-sounding bells or buzzers.
 - e. Hear a patient talk in a normal tone from a distance of 20 feet.

5. Possess the visual acuity that is necessary to provide optimal patient care while operating CT equipment.
 - a. Read the text and numbers on the CT control panel.
 - b. Recognize symbols within the healthcare facility and on CT equipment.
 - c. Possess full peripheral vision (e.g., side vision) to ensure patient safety.
 - d. Be able to observe and assess the condition of a patient from a distance of 20 feet.
 - e. Be able to determine subtle differences in gradual changes in blacks, grays, and whites for purposes of assessing the technical quality of a CT exam.
 - f. Perform necessary CT procedures in rooms that require dim lighting.

6. Think critically and perform and follow protocols for a wide range of procedures.
 - a. Identify cause-effect relationships in clinical situations.
 - b. Evaluate finished CT exams to ascertain that they contain proper identification and are of diagnostic value.
 - c. Select exposure factors and accessory devices for all CT procedures with consideration of patient size, age, and extent of disease.
 - d. Adjust CT equipment and ancillary devices and modify patient positioning as needed to obtain diagnostic CT exams.
 - e. Assess patient's condition and needs.
 - f. Initiate proper emergency care protocols, including CPR.
 - g. Utilize hospital/medical imaging department information systems to process and archive images.
 - h. Ability to arrange things or actions in a certain order or pattern according to a specific rule or set of rules.

7. Possess interpersonal, behavioral, and social skills to interact with a variety of individuals from a variety of social, emotional, cultural, and intellectual backgrounds.
 - a. Establish a positive rapport with patients, families, and colleagues.
 - b. Function rationally and quickly in emergency situations.
 - c. Possess ability to deal effectively with stress.

I have read these statements and believe I meet the above requirements.

Printed Name: _____

Student ID: _____

Signature: _____

Date: _____

Washtenaw Community College
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COURSE SEQUENCE

The Computed Tomography (RAD) courses will span over two (2) consecutive semesters. All Computed Tomography (RAD) courses must be taken in the scheduled semester below.

Students should contact the Radiography Program Director for advising.

Computed Tomography (RAD) courses must be successfully completed with a minimum grade of C/2.0 unless otherwise specified. (Grades are based on a 4.0 GPA scale).

Prerequisite Courses Not Required for Graduation (Required to Apply to Program)		2 credits*
RAD 223	Sectional Anatomy*	2 credits
Semester 1 (Fall)		8 credits
RAD 259	Introduction to Computed Tomography (CT) Instrumentation and Protocols	1 credit
RAD 261	Patient Care in Computed Tomography (CT)	1 credit
RAD 263	Practical Computed Tomography (CT) Imaging	3 credits
RAD 265	Computed Tomography (CT) Clinical Education I	3 credits
Semester 2 (Winter)		8 credits
RAD 262	Principles of Computed Tomography (CT)	2 credits
RAD 266	Advanced Computed Tomography (CT) Imaging	3 credits
RAD 267	Computed Tomography (CT) Clinical Education II	3 credits
TOTAL CREDITS REQUIRED FOR PROGRAM		16 CREDITS*

*Prerequisite course(s) not included in total credits required for program.

Washtenaw Community College
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ESTIMATED COSTS

Tuition rates and fees listed below are estimates based on the 2017-2018 academic year and are only valid through the Spring/Summer 2018 semester. If a change is made in the tuition rates and/or fees for any future semester, these changes would go into effect beginning in the fall semester of each year. To view the current tuition rates and fees, please visit WCC's website at www.wccnet.edu/tuition. All fees below are estimates and subject to change.

TUITION & COLLEGE FEES (includes \$7 enrollment/technology fee per credit hour)	COST
16 credits @ \$102 (<i>in-district rates</i>)	\$1,632
16 credits @ \$165 (<i>out-district rates</i>)	\$2,640
16 credits @ \$221 (<i>out-state rates</i>)	\$3,536
16 credits @ \$255 (<i>international rates</i>)	\$4,080
2 credits for RAD 223 Prerequisite Course (Cost varies depending on tuition rates) in-district = \$204; out-district = \$330; out-state = \$442; international = \$510	\$204 - \$510
Contact Hour Fee (labs & clinicals)	\$600
Graduation Fee (cap & gown)	\$45

PROGRAM FEES	COST
Physical Exam (including lab tests & immunizations)	\$150 - \$250
CPR Certification (based on taking WCC's HSC 131 Course) (Includes tuition for 1 credit hour & \$35 Red Cross CPR Card Fee) in-district = \$137; out-district = \$200; out-state = \$256; international = \$290	\$137 - \$290
Required Text Books & Course Packs	\$300
Optional Books	\$200
Uniform Costs	\$250
WCC Patches/Name Badges	\$10
National Registry Exam Fee	\$200 - \$400
Student Clinical Tracking System	\$80

ADDITIONAL COSTS TO CONSIDER	COST
Student Health Insurance	
Transportation to and from campus and clinical sites*	
Parking fees for clinical sites	
Lunches at clinical sites	
Supplies (notebooks, paper, pens, pencils, calculator, etc...)	
Childcare	

TOTAL COSTS* (tuition & college fees + program fees based on residency status)	COST
<i>In-District Residents</i>	\$3,808 - \$4,108
<i>Out-District Residents</i>	\$5,005 - \$5,305
<i>Out-State Residents</i>	\$6,069 - \$6,369
<i>International Residents</i>	\$6,715 - \$7,015

*Total cost does not include "Additional Costs to Consider".

Washtenaw Community College
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CONTACT INFORMATION AND ACCREDITATIONS

Accreditation and helpful contact information is provide below.

Health Programs at WCC

Website: <http://health.wccnet.edu>

Health and Second Tier Admissions

Phone: (734) 973-3596 or (734) 477-8998

Email: healthadmissions@wccnet.edu

Website:

<http://www.wccnet.edu/studentconnection/admissions/health-second-program/>

Student Connection

Phone: (734) 973-3543

Email: studrec@wccnet.edu

Transcript Evaluation

Phone: (734) 973-3590 or (734) 477-8969

Email: transcripteval@wccnet.edu

Website: www.wccnet.edu/transfer

Financial Aid

Phone: (734) 973-3523

Email: finaid@wccnet.edu

Counseling

(Advising **before** admission to the program)

Phone: (734) 677-5102

WCC Campus Map & Driving Directions

Website: www.wccnet.edu/about-us/visiting

WCC Room Locator

Website: www.wccnet.edu/about-us/room-locator

Regular Office Hours (Student Services)

Monday - Thursday: 8:00am – 7:00pm

Friday: 8:00am – 5:00pm

Saturday: 9:00am – 1:00pm

**The Higher Learning Commission of the
North Central Association**

(Institution Accreditation)

Phone: (312) 263-0456

Website: www.ncahlc.org

William Nelson

Program Director

Phone: (734) 677-5119

Email: wnelson@wccnet.edu

Sue Travis

Health Programs Counselor

(Advising **after** admission to the program)

Phone: (734) 973-3358 – by appointment only

Email: stravis@wccnet.edu

**The American Registry of Radiologic
Technologists (ARRT)**

Phone: (651) 687-0048

Website: www.arrt.org

**Joint Review Committee on Education in
Radiologic Technology (JRCERT)**

(Program Accreditation)

Phone: (312) 704-5300

Website: www.jrcert.org

American Society of Radiologic Technologists (ASRT)

Phone: (505) 298-4500 or (800) 444-2778

Website: www.asrt.org